DESIGN GUIDELINES FOR REST HOMES / RETIREMENT HOMES IN ONTARIO

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A STUDY FOR CANADA MORTGAGE AND HOUSING CORPORATION 1983

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PART A

FORWARD

In the last few years a new housing type has appeared in Canada and the United States. It is the rest home or retirement home which is privately sponsored (some financed under the insured lending program) and operated for profit or which is built under CMHC's non-profit housing program. These are developed primarily for elderly people requiring a high level of service.

These facilities are being built to conform to local health, fire and safety standards but there are no specific provincial or municipal regulations which ensure that they are designed to provide the equipment and space that is required to perform their function adequately. Their ability to provide adequate care is limited and as the demand for increased care grows in the future they may be unable to provide it at a satisfactory level of quality.

The present design guidelines dealing with rest homes/retirement homes are not in a form which can be easily used by the branch personnel and the financing the Corporation is being asked to provide or insure could be at risk if more provincially assisted nursing homes or homes for the aged become available which better serve the needs of the aging residents.

Our investigations suggest that there are basically two client groups requiring resthomes/retirement homes. One group prefers a single room with bath and some care services. The second group requires little care services, will want an apartment with limited cooking facilities and at least one meal a day provided in a central dining room.

This study defines rest homes/retirement homes and provides design guidelines for the use of the Ontario CMHC Branch Offices in assessing projects submitted for either mortgage insurance or NHA financing. The design guidelines are based and adapted from existing federal and provincial guidelines dealing with residential care facilities.

1. Introduction

The Province of Ontario is licensing only 500 new nursing home beds per year and there is no long term commitment for the coming years. Municipal homes for the aged and charitable institutions have not increased the total beds provided since 1976 and the replacement of existing facilities is also affected by the shortage of non-profit housing funds available from the Corporation.

Rest homes/retirement homes are being developed in increasing numbers to fill the need in the market place for accommodation to house residents who require a limited level of care.

While nursing homes are licensed by the Province of Ontario and have to meet stringent requirements, rest homes/retirement homes are not controlled by the province and the Corporation's existing guidelines do not provide clear direction for this sort of housing.

As the population ages rest homes/retirement homes will be faced with a demand for higher levels of care and if the provincial government decides to licence more nursing home beds rest homes/retirement homes as presently being built will be in a poor position to compete.

A set of basic guidelines delineating good design practices is required for the Corporation's field offices to enable the staff to minimize the effects that the lack of adequate provincial and municipal regulations have on the long term viability of private rest homes/retirement homes.

The guidelines are based on existing Federal and Provincial guidelines, the experience of architects, owners and administrators in the field and on a sample of residents and are designed to provide a clear, straightforward and easily understood set of desirable criteria for the approval of resthomes/ retirement homes acceptable to the Corporation for mortgage insurance and NHA financing.

2. Definitions of a Rest Home/Retirement Home

A rest home/retirement home is defined as a facility which provides less than 1½ hours per day of care and supervision for its residents in a communal environment. Accommodation can consist of bachelor and one bedroom efficiency apartments with full bathrooms and small kitchenettes for limited cooking and private and semi-private rooms with private or shared washrooms and bathing facilities. Between one meal and three meals a day would be provided in a central dining room and a range of other communal facilities would be provided.

Retirement homes would provide accommodation exclusively for elderly persons whereas rest homes might house a range of elderly and mentally and physically handicapped residents.

3. Report

The private rest home/retirement home operated for profit or by a non-profit group has introduced a new building type to the housing scene although there have been smaller facilities, usually in converted houses, for many years.

Rest homes/retirement homes range in size from 3 beds to 300 beds and provide a wide range of communal facilities and rooms with or without private washrooms or bathrooms. Some buildings also offer small kitchenettes in the rooms and one to three meals a day. Newer buildings cater to a more affluent segment of society with charges ranging from $700.00 to $3,000.00 per month with an average of $1,000 per month. Before 1972 nursing homes also provided accommodation for those who could not live on their own but did not necessarily need nursing care. However, this option was no longer available with the intoduction of the Nursing Home Act in that year.

Today Municipal Homes for the Aged and Charitable Institutions provide similar accommodation and are regulated and assisted by the Ministry of Community and Social Services. These buildings are able to provide rental subsidies to those people who cannot afford the minimum charges of $600.00 to $700.00 per month. Charitable Institutions may be built under CMHC's non-profit housing program and must offer subsidies to at least 15% of the residents. Carrying costs are lower and assistance is available from the provincial government.

Assistance is also provided through the province's Domiciliary Hostel Program in which municipalities may contract with private rest home operators to provide accommodation. These charges are then subsidizied under the General Welfare Assistance Act.

There has been a minimal increase in the total number of beds in Municipal Homes for the Aged and Charitable Institutions since 1976 and only 500 new nursing home beds are being licensed each year. This shortage and increased affluence which makes the private rest homes/retirement homes affordable to more people has also played a major part in the increased numbers of this new housing type. However, these facilities may not be able to deal with the need for more personal care as the population ages. The market is also limited due to the high charges required to provide the extensive services offered. The greater demand may be for facilities that offer more independence (such as small apartments with kitchen facilities) and lower charges.

The U.S. Department of Housing and Urban Development has found (perhaps because their nursing homes are not part of a universal health care system) that as the population ages and the demand for higher levels of care grows the pressure develops for conversion of rest homes into nursing homes. This has resulted in substandard nursing homes or obsolete rest homes with limited market appeal. The Department has therefore been discouraging rest homes per se. As an alternative, they have been favouring projects with small self-contained apartments and communal activity and dining facilities. This sort of facility has a wider market appeal and is suitable for other age groups as well.

The Province of Ontario through its universal health care program has quite clearly stated its intention to regulate and fund the nursing home program. The Province is also involved in providing nursing care through the Ministry of Community and Social Services' Municipal Homes for the Aged and Charitable Institutions Program. Between 25 and 60% of the beds in each Municipal Home for the Aged are extended-care beds and are funded by the Ministry and approximately 1/3 of the beds in charitable institutions are designated as extended care beds. The standards required are very similar to those of the Ministry of Health. This program is also assisted by CMHC through its non-profit NHA

financing. However, although this program is not developing any new beds, residential beds are being changed to extended care beds as the need arises. A serious shortage of nursing home and extended care beds may develop due to the lack of new beds being developed.

The Minister of Community and Social Services has also stated categorically that the Province is not going to regulate or license private rest homes and that it is the local municipalities' responsibility. Local governments have to date shown little interest in regulating this housing type. The city of Hamilton has passed a by-law specifically dealing with housing providing care and the Regional Municipality of Ottawa-Carleton has passed a model by-law which each local municipality must adopt before it becomes law. The City of Toronto treats private rest homes/retirement homes as modified nursing homes for zoning and building by-law purposes and is not concerned about regulating the services provided. The Rest Home Association of Ontario, an association of private operators, is preparing a handbook for the use of its members in an attempt to establish some consistent standards but the possibility of any effective public regulations throughout the province either at the provincial or municipal level seems unlikely in the near future.

Experts involved in the field stress the need for a pleasant residential environment and private accommodation with the atmosphere of an apartment house or residential hotel. The majority of the accommodation should be for single occupancy, either single rooms with en-suite bathrooms or self-contained apartments.

The apartments should contain limited cooking facilities and central dining facilities for 1 to 3 meals a day and some lounge and activity areas. These would cater to the healthy elderly who require very little personal care. This type of accommodation also has the potential to cater to different age groups in the future if the market changes.

For those who need more personal care and supervision but do not qualify for nursing home accommodation a high percentage of single rooms with private baths and generous communal spaces should be provided. These facilities should also have the flexibility to increase the care component as the population ages.

4. Methodology

The following areas were explored in the progress of this study

a) the current legislation relating to residential care facilities
b) the defining of rest homes/retirement homes for the study
c) the review and analysis of projects throughout the province
d) the reactions of residents, lenders, owners and administrators to various aspects of rest home/retirement home development and management.

Federal and Provincial (Ontario, British Columbia, Manitoba) guidelines, legislation and requirements for different types of residential care institutions were reviewed. A comparison was then made between their requirements and design standards, and the four projects reviewed in detail. Table 1 - Comparison of Spatial Requirements was prepared (see pages). There is a general similarity between the standards included in the various documents and the standards used in the rest homes analysed. The most obvious variations are in the washroom and bathroom facilities and the lounge/activity areas.

Rest homes/retirement homes were defined after studying the relevant legislation, CMHC Design Guidelines and staff guidelines in the Province of Ontario.

Numerous projects were reviewed and analyzed and a few selected projects were studied in depth. In addition to the desk analysis, several projects were visited and studied for their design quality and the level of facilitites and services provided. Many of the initial projects selected for study were found to be Nursing Homes, Municipal Homes for the Aged or Charitable Institutions and were rejected as unsuitable for detailed study. The confusion between these facilities and private rest homes/retirement homes indicated a serious need for each project reviewed to be immediately categorized.

It was felt prudent to let the administrators select the residents for interviews regarding their reactions to their accommodation and services as several administrators were very apprehenvise about our interest in their projects.

TABLE 1. COMPARASON OF SPATIAL REQUIREMENTS (Sheet 1)

	C.M.H.C. Nursing Homes and Hostels	Ministry of Community and Social Services	Ministry of Health, Nursing Homes	British Columbia, Community Care	Manitoba, Social Services
Width of corridors	1700mm	1700mm	1820mm	1850mm	
Bedroom Areas	$10m^2$ for private $16.8m^2$ for semi-private		$10.22m^2$ for private $16.72m^2$ for semi-private	$10m^2$ private room per resident	no area specified, suitably furnished, one chair for each resident
Door Width	800mm		1220mm	830mm	
Clothes Closets			$.46m^2$ per resident	$.5m^2$ per resident	space for clothing
Sitting Room Areas	$.44m^2$ per resident		$1.39m^2$ per resident	$1.4m^2$ per resident	space with furniture
Dining Room Areas	$1.4m^2$ per resident	1.4 to 1.9 m^2 per resident	$1.85m^2$ per resident	$1.4m^2$ per resident	seating for residents and staff
Activity Room Areas	$2m^2$ per resident		$.55m^2$ per resident	$1m^2$ per resident	space with games and equipment
Kitchen Area	$1.12m^2$ per resident	.75 to $1.58m^2$ per resident			
Bathroom and Toilet Facilities	minimum of 1 toilet and basin for every 4 beds	1 toilet and basin for every 4 to 5 beds	1 toilet and basin for every 4 beds 1 tub or shower for every 12 beds	1 toilet and basin for every resident 1 tub for every 10 residents	

TABLE 1. COMPARASON OF SPATIAL REQUIREMENTS (Sheet 2)

	Municipality of Ottawa-Carlton	City of Hamilton	Trafalgar Lodge, Oakville	Oxford Lodge, Guelph	Meadowcroft Lodge, Etobicoke	Greenview Lodge, North York
Width of Corridors			1200 to 1820mm	1820mm	2000mm	1820mm
Bedroom Areas	all rooms private, $7m^2$ per resident	$9.3m^2$ for pri. $16.72m^2$ for semi-private $25.08m^2$ for 3 $29.73m^2$ for 4	$14m^2$ to $20m^2$ for private $22m^2$ for semi-private	$9m^2$ to $11m^2$ for private $12m^2$ to $16m^2$ for semi- pri.	all rooms $19m^2$	$11.2m^2$ to $13m^2$ for private $17.7m^2$ for semi-private
Door Width			800mm	800mm	800mm	1220mm
Clothes Closets		required	$1m^2$ min per resident	$.66m^2$ min per resident	.4 to $.75m^2$ resident	not built-in
Sitting Room Areas	$.28m^2$ per resident	$1.39m^2$ per resident	$1.17m^2$ per resident	$1.32m^2$ per resident	$.53m^2$ per resident*	$.77m^2$ per resident
Dining Room Areas	$1.4m^2$ per resident	$1.85m^2$ per resident	$2.17m^2$ per resident	$1.36m^2$ per resident	$1.54m^2$ per resident*	$1.06m^2$ per resident
Activity Room Areas			$.66m^2$ per resident	$.5m^2$ per resident	$.6m^2$ per resident*	$1.25m^2$ per resident
Kitchen Areas			$.95m^2$ per resident	$.73m^2$ per resident	1.06 m^2 per resident*	$.72m^2$ per resident
Bathroom and Toilet Facilities	1 toilet and basin for every 8 res. 1 tub or shower for every 10 res.	1 toilet, basin and tub or shower for every 7 residents or fraction	4 piece bathroom in every private and semi- private room	4 piece bathroom in every private and semi-private room	4 piece bathroom for each room *assumed to be 50% in double occupancy	3 pc. and 4 pc. bathrooms in each room, central wheelchair shower

Many of the newer rest homes visited were found to be only partially occupied. New accommodation without government subsidies is expensive and it takes considerable time to reach full occupancy.

Lenders were selected because of their involvement in financing rest homes/ retirement homes, their knowledge of the market place and their perception of the place of rest homes/retirement homes in the total spectrum of residential accommodation.

The owners and administrators interviewed were selected to represent a broad range of experience in the field.

5. The Case for Design Guidelines

Rest homes/retirement homes are not regulated by the provincial government and in the last few years there has been a significant increase in applications to the Corporation for mortgage insurance and N.H.A. financing for rest homes/ retirement homes.

There is danger of an oversupply of this sort of accommodation, and developers and architects are still unclear on what level of services and accommodation is desired by the market.

The Corporation has no specific standards for rest homes/retirement homes. Those that exist are incorporated in the Design Guidelines for Nursing Homes and Hostels with Care Services for the Elderly and are not easy to use as they are organized in a way that makes the specific information required difficult to extract.

Due to the lack of provincial regulations and a market which is in danger of being oversupplied by facilities of questionable quality a clear concise set of guidelines which can be easily used by the Corporation staff and owners and designers is extremely important.

6. Summary

The market is limited for Resthomes/Retirement Homes as the accommodation is relatively expensive and the rent up period is long. The market is looking for self-contained units with communal dining and lounge facilities or rooms and suites with private baths, more generous communal areas and a high level of care services.

The majority of the clients are single and desire private rooms with bathrooms. There is only a limited demand for double rooms and suites for couples. Ward accommodation is not considered acceptable and is to be discouraged.

The level of care services has to be flexible to meet the growing demand of the aging clientele. The experience and expertise of the proponent is also very important.

1. PREAMBLE

Rest Homes/Retirement Homes to be sucessful should have a residential quality. An institutional environment is to be avoided as these facilities house a broad range of residents, who may be staying for long periods of time. These residents range in ages from 20 years old to over 90 years old and may be physically or mentally handicapped and require a residential care environment. In all cases the care provided shall not exceed 1½ hours per day.

Ward accommodation for 3 or more persons is to be avoided as it is not conducive to the well being of the residents. Also semi-private rooms can be offered at negligible additional costs. The majority of proposals received by the Corporation for direct financing or loan insurance are for retirement homes restricted to persons 55 years of age or over some of whom may have minor health problems and desire a residential health care facility. The market for this sort of accommodation is not yet well defined and there is a serious risk of over supply, particularly for more expensive accommodation. The location, previous experience and success of the proponent and his ability to provide adequate equity in the project are of paramount importance. A market survey indicating the sort of accommodation and the charges appropriate to the market is considered important and essential for any intelligent assessment by the Corporation.

The guidelines have been based primarily on the document listed at the end of this section with modifications and additions based on the project surveys, interviews and meetings with residents, owners, administrators, designers and CMHC staff. Guidelines taken from specific documents have been given the reference number if further research is denied.

PART B

2. DESIGN GUIDELINES

A. Site Selection and Development

A1 Location

1. convenient to shops, banks, library, transportation, churches, clinic or hospital and community centre[5]
2. pleasant, safe walkways[5]
3. maximum distances recommended[1]

- shops, banks	2 - 3 blocks	355m
- library		1,600m
- transportation		250m
- churches	1 - 2 blocks	800m
- clinic or hospital		800m
- community centre		365m

4. convenient to food shopping where dwelling units with food preparation areas are being provided.
5. adjacent non-residential uses, if any, should not be detrimental to health, safety and enjoyment of the resident.[3]

A2 Site Development

1. landscaped grounds suitable for recreational purposes and providing a building setting[5/6]
2. outdoor area suitable for passive recreation[5]
3. activity areas located in sun and shade, sheltered from rain, wind and noise, for both active and passive use[5]
4. shuffleboard, horseshoe pitch, checkers, chess, outdoor cooking and eating, gardening plots[5]
5. development should be in scale with adjacent residential buildings and of a density complimentary to the area[3]
6. special natural or historic features should be preserved and incorporated[3]

A3 Specific Site Development Requirements

1. provide clear separation between vehicular and pedestrian traffic[1]
2. provide convenient wheelchair access to entrances on hard surface paving to all areas

3. outdoor walkways should be 1.67m wide with ramp rather than steps, max. slope 1:20, provide a bench every 35m set back 500mm from the walkway1
4. provide a driveway wide enough for mini-buses or vans to pass1
5. separations space for habitable room window - 5m or half the height of the wall to a maximum of 8m, privacy zone - 3m (if sill is 2m above grade no privacy zone is required)3
6. separation space for other windows and blank walls - 1.2m + 300mm for each additional storey above 1st storey up to maximum of 3m, no privacy zone is required3
7. amenity area required - 15m2 for bachelor units and 20m2 for one bedroom units, includes patios, landscaped areas, balconies, recreational facilities, communal lounges and other areas used for active or passive recreation by the residents3
8. provide landscaping and planting plans prepared by a qualified Landscape Architect
9. provide 1 parking space for every 6 residents, provide 5% of the total for use by the disabled - 3,600 mm wide and as close to front entrance as possible, parking in certain locations may be reduced with the approval of the Branch Office
10. orient building so that maximum number of rooms face south and east

B. General Planning

B1 Size of Building

1. rest homes/retirement homes should not be smaller than 50 beds or larger than 175 beds* unless they are combined with a nursing home in which case they could be as small as 40 beds (separate lounge and activity areas are required by the Province), the optimum size is 120 beds

* current provincial thinking

B2 Circulation Spaces

Entrances

1. provide barrier free entrance designed for use by the disabled (see Section-3.)[1]
2. minimum depth of vestibule - 1900mm[7]
3. entrance doors controlled by reception desk and/or by the residents in the case of apartments
4. automatic sliding doors at entrance are recommended[5]
5. non-slip material on floor[1]
6. protected from elements[1]
7. provide sitting area nearby for waiting and removal of winter boots etc.[1]
8. locate parking nearby with convenient drop off point under canopy at front entrance
9. convenient to transit stop
10. providing access to activity areas, offices, elevators, residential areas, etc.[5]

Lobby

1. provide lobby adjacent to reception area, .5m^2 per resident, with waiting area adjacent to front entrance, reception desk should face onto this space
2. provide access to activity area, elevators and residential areas
3. incorporate bulletin boards, mail boxes and mail drop[1]

Corridors

1. minimum width - 1820mm[6]
2. non-slip finish, carpeting recommended
3. handrails on both sides at least 45mm in diameter, 40mm clear to the wall, between 850 and 900mm above the floor[6]
4. avoid unshaded windows at the ends of corridors (the glare which can result creates problems for elderly people with sight problems), provide side windows for light and view

Elevators

1. provide at least one elevator in buildings over 1 storey large enough to accommodate a stretcher (2350mm deep and 1640mm wide)[6]

2. other elevators - 12 person general purpose (1400mm deep and 1640mm wide)[1]
3. provide waiting space with seating in front of elevator clear of corridor width[1]
4. provide controls suitable for disabled and visually impaired[7]

5. Stairs
   1. non-slip material[1]
   2. tread - 265mm maximum, nosing - 15mm maximum[1]
   3. handrails should be designed with the physically and visually impaired in mind (45mm in diameter)
6. Ramps
   1. provide ramps in lieu of stairs where possible - maximum slope 1:20[7]

B3 Administrative Areas

1. Reception Desk
   1. facing onto lobby[5]
   2. counter height convenient for ambulatory and disabled residents[1]
   3. convenient access to offices[1]
   4. entrance door control and intercom
2. Offices
   1. administrative offices, communication centre, treatment/ examination room, locked medication space,emergency signal panel, fire alarm system
3. Staff Areas
   1. staff washroom facilities distributed throughout building
      up to 9 - 1 wc and 1 basin for men and women
      up to 29 - 2 wc's and 2 basins for men and women
      plus 1 wc and 1 basin for men and women for each additional 25 up to 100 plus 1 wc and 1 basin for men and women for each additional 30 over 100.[6]
   2. staff changing rooms - lockers, rest area for female employees and shower for male employees[5]

3. ratio of staff to residents is expected to be 1 to 3, female to male 5 to 1[5]
4. provide staff room with counter, sink and refrigerator

B4 Communal Spaces

1. Lounges, Sitting Rooms
   1. .45m^2 per resident is the recommended total minimum area
   2. lounge area should have pleasant view to outdoor sitting area, sunshine part of the day, close to visitors washroom
   3. provide separate smoking area and area which can be used as a bar
   4. sitting rooms for 8 to 10 persons should be located on each floor in the residential areas[5]
   5. provide library area or mobile library carts and book-shelves in lounge in smaller projects[5]
2. Activity Area
   1. 2m^2 per resident is the recommended minimum area
   2. provide separate T.V. lounge, visitors' room, games room/ card room, craftroom, occupational therapy area
   3. provide multi-purpose/assembly room (could be dining area)- adequate to seat all residents
   4. provide beauty/barber shop with sink and counter
   5. provide residents' meeting room[5]
   6. provide separate areas for specific activities which can be sound isolated
   7. provide mechanical ventilation for all spaces accommodating 10 or more persons[1]
   8. provide equipment storage space
   9. provide sinks and counters in craftroom and occupational therapy room
   10. basement locations are not recommended
3. Dining Room
   1. 1.85m^2 per resident is recommended as a minimum area[6]
   2. accommodation for all residents at one sitting is desirable, if two sittings is to be required seating for 60% of the residents should be provided.[5]

3. may be used as multi-purpose assembly room
4. convenient access to a passive outdoor recreation area is desirable[5]
5. provide visual/auditory barrier to kitchen entrance[5]
6. provide service stations in large dining rooms[5]
7. provide waiting area close to dining room (could be lounge or sitting area and provide handrails adjacent to entrance where groups may stand and wait
8. a separate small dining room for private parties is recommended
9. carpeting is recommended and the lighting design should contribute to the residential environment

4. Snack Area
   1. provide snack area on each floor adjacent to a sitting room or lounge with counter, sink and small refrigerator.
5. Visitors Washrooms
   1. to be designed for use by the disabled (see DESIGN DETAIL NO 1)[1]

B5 Residents Rooms

1. One Room and Two Room Dwelling Units (see sketches P 26A & 26B)
   1. entry area should be designed so that the view into the unit is screened[5]
   2. provide minimum living space to accommodate a sofa, 2 Lounge chairs, a television set and a table[5]
   3. provide a compact area for limited food preparation with a 2 burner stove, a sink and a small refrigerator (the refrigerator should be raised to counter height for accessibility)
   4. provide an area for a small table and 4 chairs[5]
   5. in one room units the sleeping area may be part of the sitting area or in a sleeping alcove in two room units
   6. provide a minimum sleeping room largeenough to accommodate one double or two single beds, two bedside tables and one chest of drawers[5]

7. provide a 4 piece bathroom convenient to the sleeping area[2]
8. provide an emergency signal system in the bathroom and sleeping area[5]
9. where balconies are provided the minimum depth should be 1800mm[5]
10. provide a mix of one room and two room units
11. prepare furniture layouts for each unit type

2. Private and Semi-Private Rooms and Suites

(see sketches Pages 26 C and 26 D)

1. provide a mix of Private and Semi-Private Rooms and two room Suites, (interconnecting doors between single rooms will provide increased flexibility in use)
2. minimum areas: Private Rooms - $10m^2$
   Semi-Private Rooms - $17m^2$
   Suites-sitting room - $10m^2$
   -bedroom - $14m^2$
3. wards should not be provided as they do not provide the privacy and residential environment required
4. provide washroom directly adjacent and bath nearby[5]
5. provide emergency signal system close to bed head[5]
6. provide furniture layouts indicating possible variations in arrangement showing bed/s, dresser/s and lounge chairs.

3. Washroom and Bathrooms

1. private 4 piece bathrooms are strongly recommended for all dwelling units, private and semi-private rooms and two room suites
2. 2 piece washrooms shared by 2 adjoining rooms with tubs or showers located nearby off the corridor are acceptable for a small percentage of the rooms[5]
3. where private bathrooms are not provided a minimum of one tub or shower for every 12 beds in smaller buildings, one for every 15 in larger buildings is required[5]
4. provide lever type fittings for all fixtures[1]
5. a non-slip finish should be provided for tub bottom
6. hand showers are recommended
7. provide grab bars as indicated in DESIGN DETAIL NO 2 and towel bars designed to function as grab bars[5]

8. provide emergency signal system in all washrooms and bathrooms[5]
9. provide at least one wheel chair shower stall in larger facilities, see DESIGN DETAIL NO 4
10. a whirlpool tub is recommended for larger buildings

4. Closets
   1. provide 1 to 1.5m of closet space per person
   2. it is recommended that the closet be located facing onto the entrance corridor of rooms, if possible, so that the walls of the room are all available for furniture placement
5. Doors
   1. minimum door width into rooms and washrooms - 810mm
   2. provide lever type handware
6. Windows
   1. minimum area - 10% of floor area, 1/2 of area opening for ventilation
   2. provide screens
   3. protect windows from direct summer sun wherever possible
   4. provide windows with cill no higher than 750mm to provide a clear view to the exterior from a sitting position and wide enough for plants (300mm)
7. Air-Conditioning
   1. air-conditioning should be provided in the central areas and corridors (rooms and corridors should be adequately ventilated)

B6 Service Areas

1. Kitchen
   1. 1.12m^2 per resident is recommended as the minimum area[6]
   2. a kitchen layout by a qualified kitchen consultant should be required
   3. provide day food storage, refrigerated food storage, frozen food storage, vegetable preparation area, meat preparation area, cooking/baking area, hand washing area, pot/pan washing area, garbage storage, staff washroom and facilities, small office for food supervisor or dietitian

2. Garbage Facilities
   1. provide well ventilated and drained area convenient to service entrance, more than 3 days storage requires aninsulated and refrigerated space[1]
   2. provide garbage chute for garbage disposal in building where dwelling units have food preparation areas.
   3. show location of garbage bins
3. Laundry Facilities
   1. provide domestic laundry equipment in a convenient location and adjacent to sitting room to encourage residents to do their own laundry[5]
   2. provide area for clothes drying, ironing and folding[5]
   3. provide central laundry for soiled linen, unless outside service is to be used, with a soiled linen receiving area adjacent to laundry or shipping area, washing and ironing area, office and clean linen area adjacent to laundry or shipping area[5]
4. Other Areas Recommended
   1. central housekeeping space
   2. central maintenance
   3. janitor closets
   4. utility rooms
   5. general storage
   6. service entrance
5. Minimum Lighting Levels Recommended[6]

1.	corridors	215.28 lux
2.	stairways	322.92 lux
3.	at beds	376.92 lux
4.	drug cabinet	1,076.39 lux
5.	other areas	215.28 lux

6. Switches and Outlets
   1. locate switches at doors to rooms
   2. provide over head light or switched receptacle in living rooms and bedrooms

C. Requirements for the Disabled

C1 Number of Units

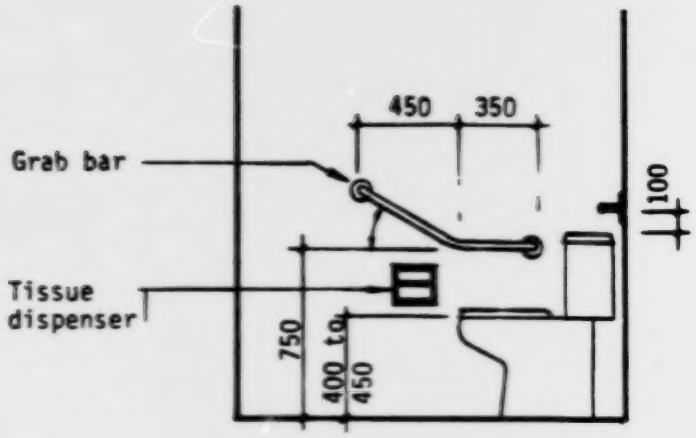
1. provide at least 5% of apartments or rooms suitable for use by the disabled

C2 Minimum Dimensions

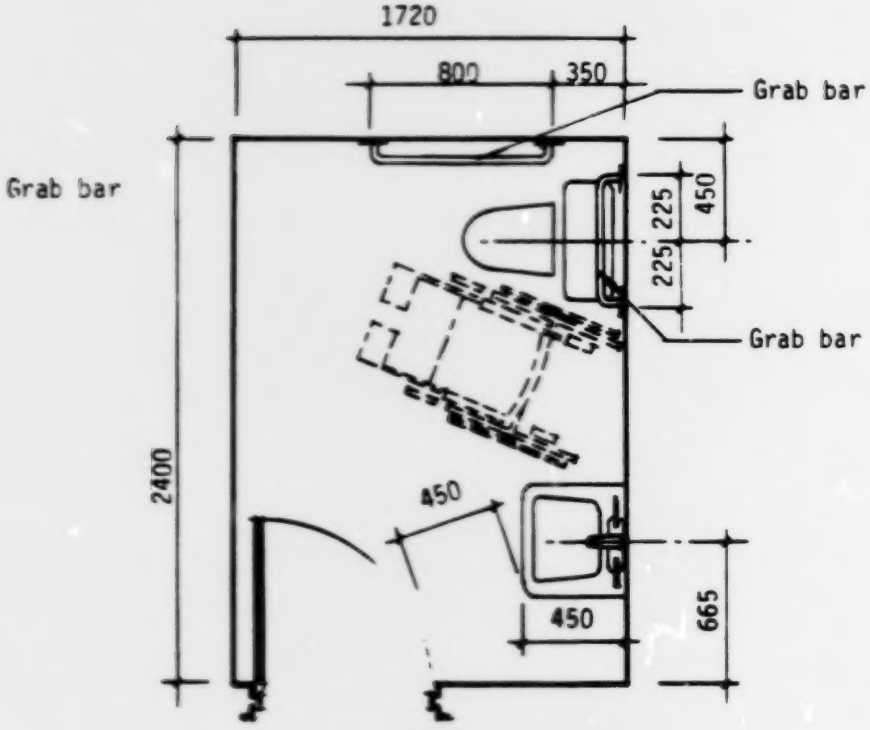
1. provide 460mm beside door on pull side
2. locate convenience outlet 455mm above the floor and the light switch no higher than 1065mm above the floor
3. bed to wall for wheelchair transfer - 1200mm
4. visitors washroom see DESIGN DETAIL NO 1
5. bathrooms see DESIGN DETAIL NO 3
6. wheel chair shower stall (see DESIGN DETAIL NO 4)
7. width of corridors within units or rooms - 970mm
8. apartment and room entrance doors - 860mm
9. interior doors of apartments - 810mm
10. maximum height for window hardware - 1420mm
11. height of residents planting area between 600 and 900mm
12. area in garbage chute room clear of door swing 600 x 1500mm
13. turning circle in room clear of furniture - 1500mm

C3 Other Requirements

1. adjustable counter heights in kitchens
2. provide furniture layouts for dwelling units and rooms intended for the disabled



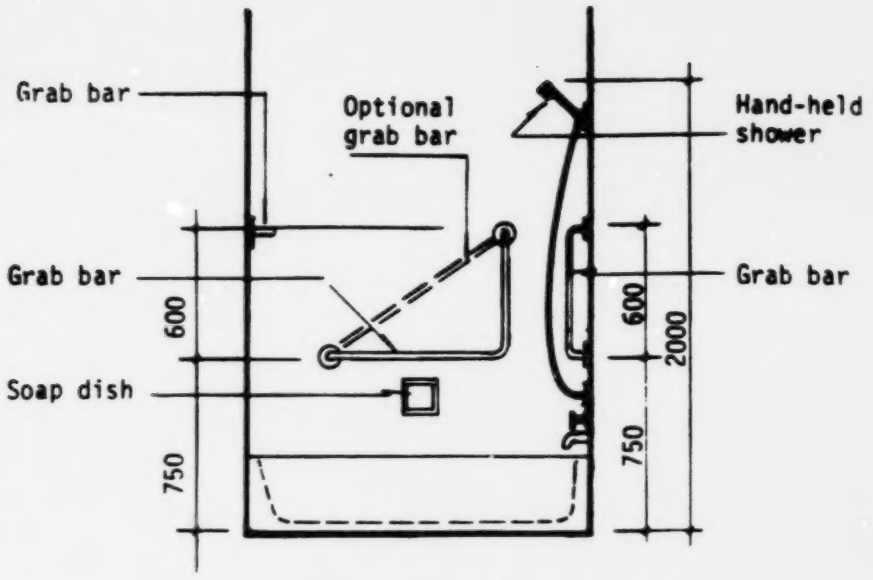
ELEVATION showing TYPICAL
WATER CLOSET GRAB BAR



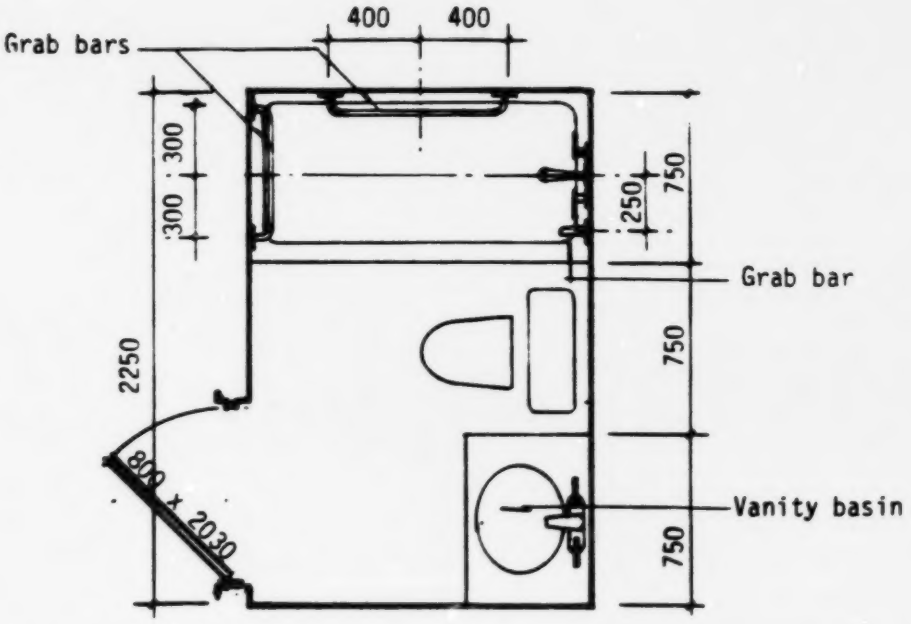
PLAN

DETAIL OF VISITORS WASHROOM 1/7
(Suitable for use by the disabled)

DESIGN DETAIL No.1.

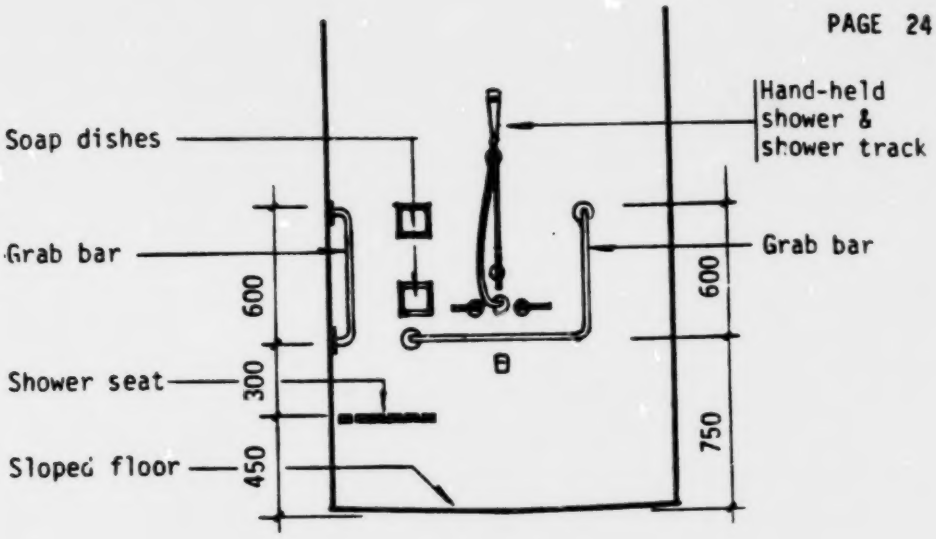


ELEVATION of TUB RECESS

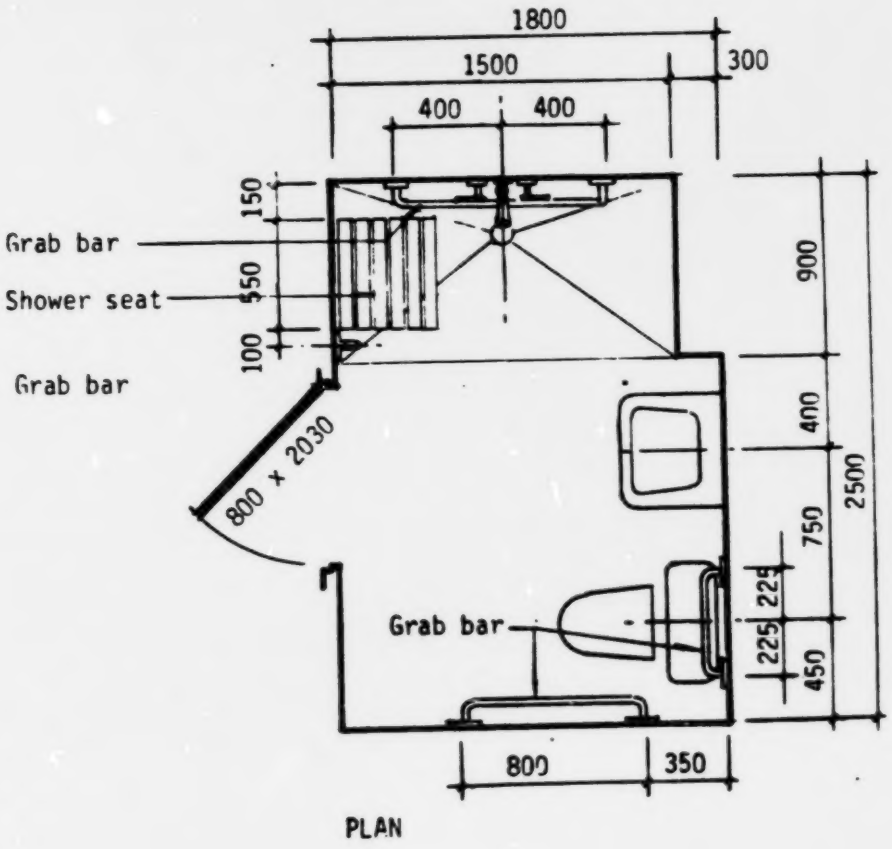


PLAN

DETAIL OF TYPICAL FOUR PIECE BATHROOM[8] DESIGN DETAIL NO.2.



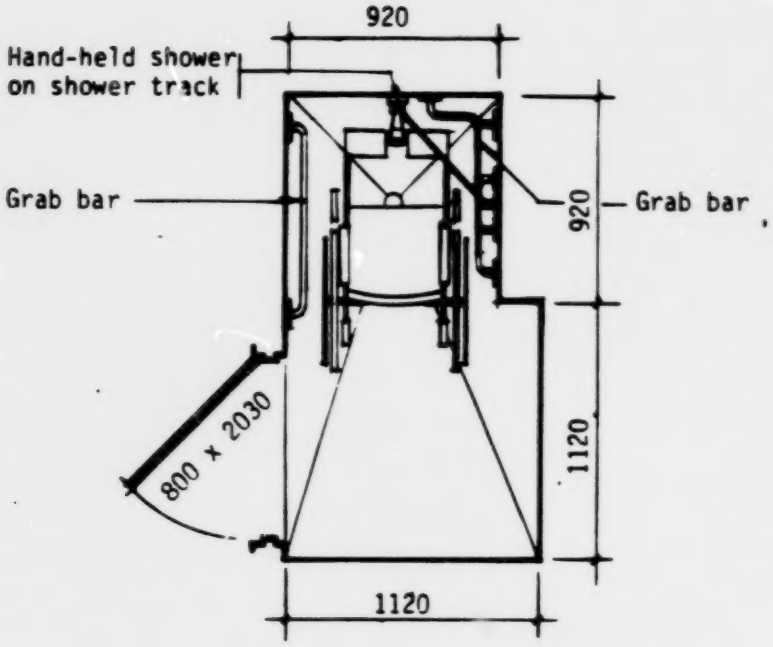
ELEVATION of SHOWER RECESS



PLAN

DETAIL OF BATHROOM FOR THE DISABLED

DESIGN DETAIL No.3.



PLAN

DETAIL OF WHEELCHAIR SHOWER[1] DESIGN DETAIL No.4.

4. References

1) Nursing Homes and Hostels with Care Services for the Elderly. CMHC Ottawa 1979

2) Housing the Elderly CMHC Ottawa 1972

3) Site Planning Criteria CMHC Ottawa 1978

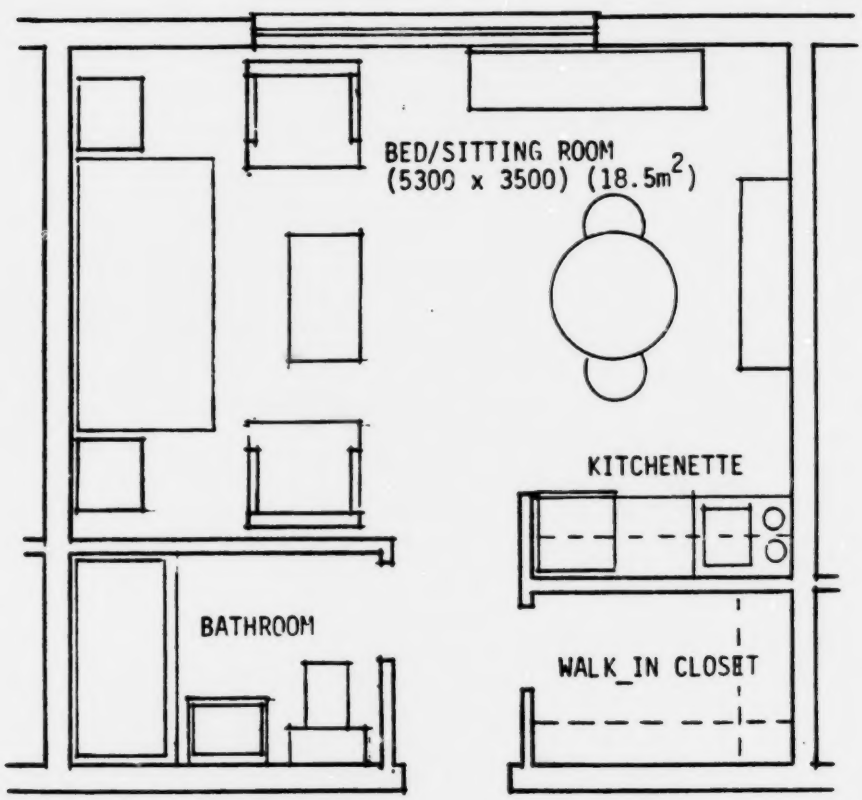
4) Interim Technical Guidelines CMHC Ottawa 1978

5) Planning Guidelines for Homes for the Aged and Elderly Enriched Housing Ontario Minitry of Community and Social Services, Capital Administrative Services Branch 1980

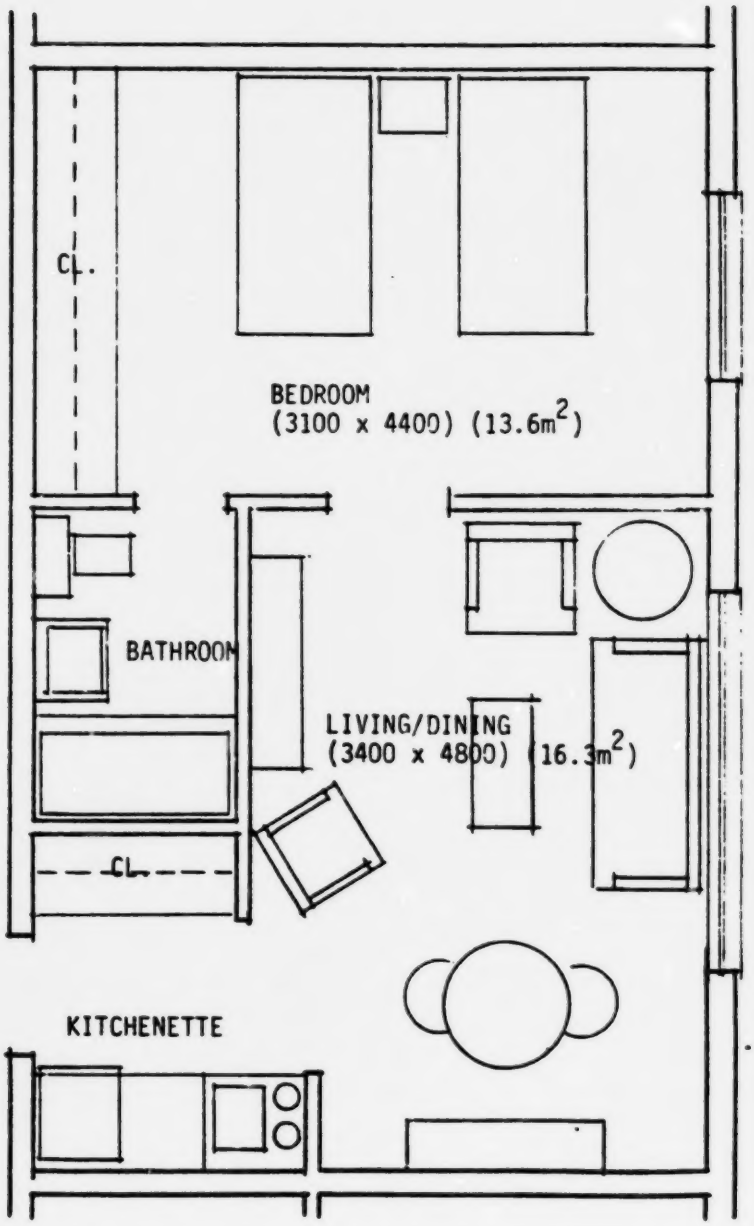
6) Nursing Home Act Government of Ontario 1982

7) Housing Disabled Persons CMHC 1982

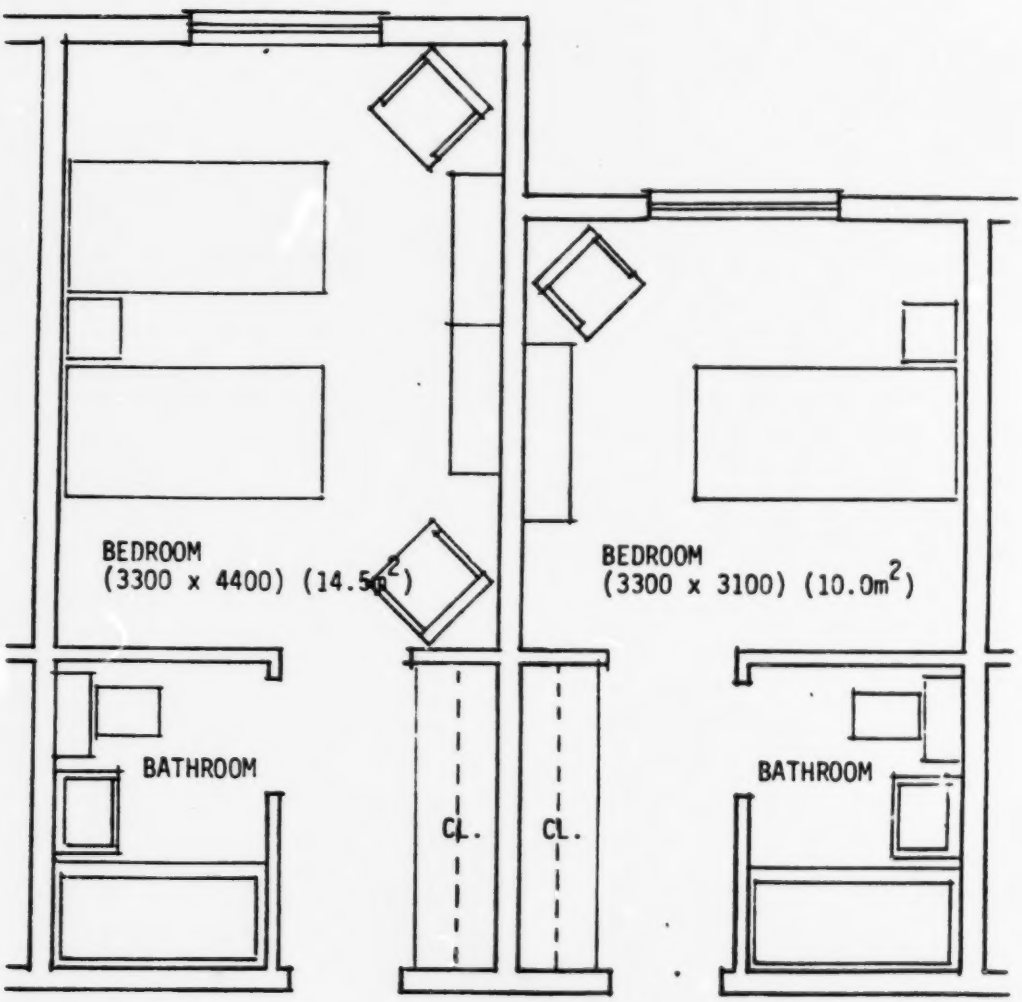
8) Technical Guide for Special Projects with Care Facilities. Ontario Ministry of Municipal Affairs and Housing 1982



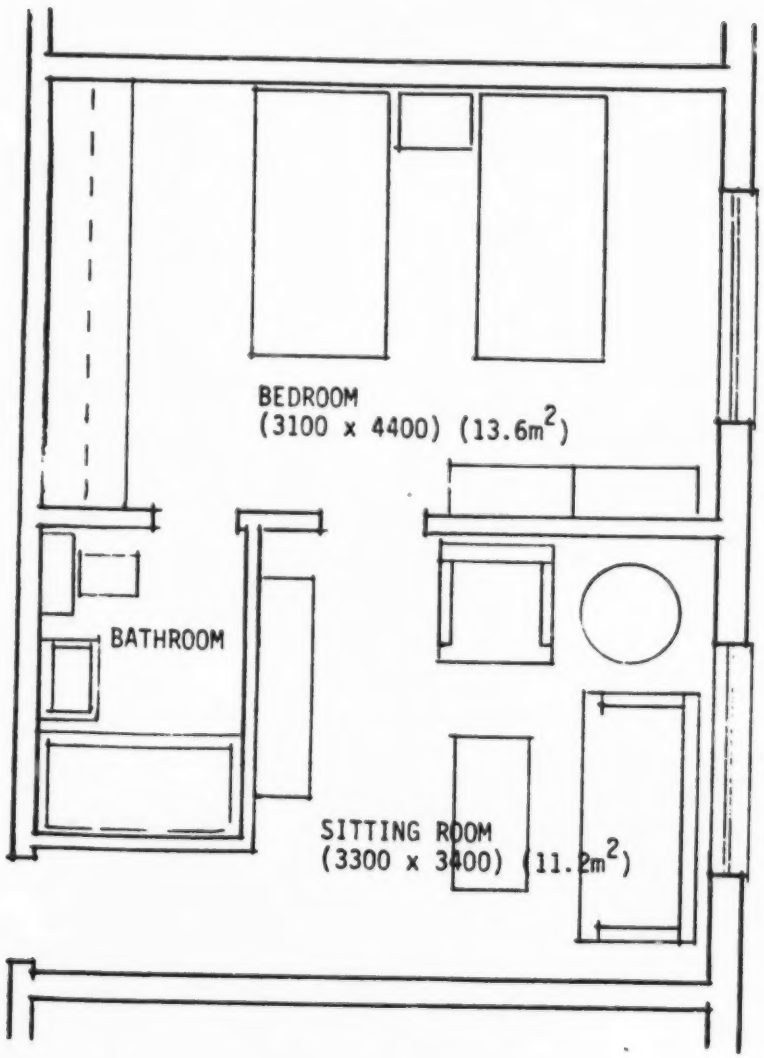
ONE ROOM UNIT - 28m²



TWO ROOM UNIT - 40m²



SEMI PRIVATE ROOM - 22.5m² PRIVATE ROOM - 18m²



TWO ROOM SUITE - 32.5m²

PART C

C. APPENDICES

1. Legislation

Current provincial and municipal legislation and policy in Ontario and Canada for nursing and rest homes, highlighting the differences, probable future directions and the ensuing implications for the Corporation.

Government of Ontario

a) Nursing Homes Act - Revised Statutes of Ontario 1980, Chapter 320, and Regulation 690, Revised Regulations of Ontario 1980 as amended to O. Reg. 54/82, February, 1982.

b) Homes for the Aged and Rest Homes Act - Revised Statutes of Ontario, 1980, Chapter 203 and Regulation 502, Revised Regulations of Ontario, 1980, as amended to O. Reg. 70/82, March, 1982.

c) Charitable Institutions Act - Revised Statutes of Ontario, 1980, Chapter 64 and Regulation 95, Revised Regulations of Ontario, 1980, as amended to O. Reg. 553/82, August, 1982.

d) Guidelines for Rest Homes, Lodging Houses, Group Homes - Ministry of Health Task Force, 1976.

Government of Manitoba

Social Services Administration Act - Manitoba Regulation 41-81

Government of British Columbia

Community Care Facilities Licensing Act. B.C. Reg. 162/77.

Regional Municipality of Ottawa-Carleton

Standards and Guidelines for Domiciliary Hostels (to be passed by local councils).

The City of Hamilton

Second Level Lodging Houses Licence By-law. Consolidation of By-Laws 80-259 and 81-93.

The City of Toronto

A By-law respecting Rooming Houses. No. 502-80, June 6, 1980.

The Borough of Etobicoke

A By-law to regulate and license Lodging Houses in the Borough of Etobicoke. No. 1978-41.

Nursing homes in Ontario are regulated and licensed by the Nursing Home Inspection Service, Ministry of Health, Institutional Operations Branch, and deal specifically with residents who require more than 1½ hours of skilled care per day. The nursing home facility is owned and managed by private operators who recieve (at present) $39.00 per day, per resident, directly from O.H.I.P. Those residents desiring semi-private accommodation pay extra. However, the operator is required to provide at least 55% of the beds at ward rates.

At present the Province is licensing about 500 new beds a year and the amount of money budgeted each year determines the total number of beds to be given new licences. Nursing homes operators are permitted to provide additional rest home beds up to 25% of the number of licenced beds. No O.H.I.P. assistance is available for these beds.

The Nursing Home Act spells out in complete detail the facilities and services required and all plans must be approved by the Nursing Home Inspection Branch and the Ontario Fire Marshal. Once a license has been issued to a new facility it is very unlikely for it to be revoked. A nursing home cannot operate without a license and provincial involvement is assured.

Homes for the aged are regulated by the Ministry of Community and Social Sercices and may be owned by either a municipality or a non-profit group. The Ministry staff has prepared a set of Planning Guidelines and the municipality or non-profit group must obtain approval of the plans and budget for projects built under their programs. These projects are financed under the C.M.H.C. non-profit housing program which provides a subsidy to reduce the mortgage costs to an effective rate of 2%. The province provides a capital grant of up to 50% of the approved capital budget and picks up 70% of the operating deficit in the case of municipal homes for the aged. For non-profit groups which come under the Charitable Institutions Act a grant of $5,000.00 per bed for new construction, $1,200.00 per bed for acquisition, renovation or structural alteration and a subsidy of up to 80% of the operating deficit is provided (for the residential care component based on an established per diem rate). For those approved for extended care in municipal homes for the aged the Ministry of Community and Social Services provides 100% of the operating costs based on an established per diem rate. For charitable institutions the Ministry provides 70% of the operating costs based on the established nursing home per diem rate.

There has been no increase since 1976 in the number of residential care and extended care beds funded by the Ministry of Community and Social Services. The program has been solely concerned with the upgrading and replacement of existing facilities. The rest homes referred to in the Act were originally facilities directed to extended care only. These have all been phased out. There is no provincial legislation in Ontario which deals specifically with private rest homes or retirement homes and the Minister of Community and Social Services, the Hon. Frank Drea, has stated that municipal governments are the best level of government to deal with regulation of rest homes/retirement homes. It does not seem likely that the province will initiate any legislation in this area in the near future. However, the current president of the Rest Home Association of

Ontario, Mr. Dal Bianco, sees a comprehensive, consistent set of regulations enforced by the province as the best answer. The Association is, however, in the process of preparing guidelines for its members which it hopes will serve as a model for any future regulations by the province or local municipalities. Any by-laws passed by the local municipalities are subject to the limitations imposed by the Municipal Act and the General Welfare Act.

In 1976 a task force was formed in the Ministry of Health with the purpose of providing "Guidelines for Local Health Units concerning Rest Homes, Lodging Houses, Group Homes and like facilities.". The preliminary statement indicated that "under Section 88 and 101 of the Public Health Act the local Board of Health has the responsibility for supervising the environmental and sanitary aspects of these homes, and the care and treatment provided to the elderly, infirm or children.". A set of guidelines was produced but they have not become part of the local Boards' of Health guidelines.

The Governments of British Columbia and Manitoba have adopted legislation requiring licensing for residential care facilities. In the case of British Columbia it deals with facilities housing 15 or more adults and requires certain minimum standards of supervision, care, space, ventilation and light. A single room with ensuite toilet and hand basin is required for each resident. Manitoba's legislation deals with residential care facilities housing more than 3 adults. Although it requires certain standards related to supervision and care, it does not state any specific requirements for space,ventilation or light.

At the municipal level in Ontario, Hamilton has passed a by-law dealing specifically with private rest homes which they designate as - Second-Level Lodging Houses providing accommodation for 4 or more residents "where, for a fee, the Operator offers to the Residents guidance in the activities of daily living and advice and information" and "where, 24 hours a day, at least the Operator or one adult employee of the Operator is on duty in the House and able to furnish such guidance." The standards specify minimum requirements for room sizes, light, ventilation and toilet and bathing facilities.

The Regional Municipality of Ottawa-Carleton has adopted a model by-law setting standards and guidelines for domiciliary hostels or residential care homes which they define as a building which accommodates for hire persons requiring residential care (excluding accommodation regulated under other Acts, legislation or by-laws). Some of the area municipalities have passed or are in the process of passing this by-law. However, Ottawa-Carleton also hopes to obtain an amendment to the Municipal Act in the near future to allow the regional government to control and regulate domicilary hostels (they have used this term to distinquish these facilities from transient hostels). Minimum requirement for space, light, ventilation and toilet and bathing facilities are required.

Neither the City of Toronto nor any of the other Cities or Boroughs in Metorpolitan Toronto have adopted a specific by-law to deal with private rest homes/retirement homes although the City of Toronto and the Borough of Etobicoke licence lodging houses. Newer rest homes/retirement homes

have usually been built under specific by-law amendments. These municipalities have not felt the need to control or regulate the services offered the residents.

Table 1. Comparison of Spatial Requirements (see pages) provides a comparison of the various standards in the above regulations and by-laws.

2. Projects Studied

1) Trafalgar Lodge Oakville

This is a small facility completed in the fall of 1982 aimed at the luxury market providing a high percentage of private rooms. The dining and lounge area are interior spaces (the lounge has skylights) and additional recreational space is minimal. The reception area does not control the front or rear entrance and security may be a problem.

2) Oxford Lodge Guelph

This is a reasonably well planned facility in a renovated 19th century stone factory building completed in the spring of 1982 with a high percentage of double rooms. Adequate service areas were not provided and the large patio off the loungeis exposed to direct afternoon sun. A craft room has been provided adjacent to the dining room by eliminating two of the original rooms.

3) Woolwich Lodge Guelph

This is an existing small facility in an older building. A poorly thoughtout renovation has resulted in awkward circulation and unpleasant spaces. The bathroom layouts are particularly awkward and shower stalls have been provided in too many rooms resulting in residents having to go into other rooms for baths. However the charges are low and the facility is able to provide reasonable accommodation for a high percentage of assisted residents both young and old.

4) Erin Mills Lodge Mississauga

This is an extremely well thought-out solution to accommodation for the healthy and frail elderly completed about a year ago. Very generous communal spaces are provided in attractive spaces. Outdoor recreation is located in two courtyards and all rooms except for the special care area are accessible by ramps. The special care area provides a protected environment for those who require it.

5) Ukranian Homes for the Aged Mississauga

This existing facility combines apartments (bachelor, one bedroom and two bedroom) with hostel rooms. The communal areas are very generous and a large atrium links the hostel wing with the apartment wing. All apartments have full kitchens and bathrooms (the kitchens are underused as central dining is available). The hostel rooms (which are predominately private) share a 4 piece bath with the adjoining room. It was built under the Non-profit Program.

6) Holland Christian Homes Brampton

This existing project consists of two apartment towers linked by a one storey building containing generous communal spaces. However, no central dining facilities are provided (many residents in the original tower are now using meals-on-wheels). It was built under the Non-profit Program.

7) Rotary Laughlan Lodge Toronto

The original building in this project is classed as a charitable institution and was approved and is assisted by the Province of Ontario and provides generous communal spaces and private and semi-private rooms with 2 piece washrooms and central bathing facilities. The new wing recently completed is private non-profit but shares some of the original communal spaces. The rooms are large and have 2 piece washrooms with communal bathing facilities. Two room suites are also available.

8) Fellowship Towers Toronto

This facility which was completed last year consists of apartment and hostel accommodation with communal dining facilities and large recreational spaces. The hostel rooms are paired and share a small entrance with a coat closet, a combination unit with small refrigerator, sink and 2 burners and a small eating area. The apartment residents have the choice of using the central dining room or not. This project was built under the Non-profit Program.

9) St. Hilda's Towers Toronto

This existing project consists of two towers with bachelor and one bedroom apartments with full bathrooms and small efficiency kitchens. Residents are required to eat one meal a day in the central dining room (one for each tower). Breakfast is also offered. Generous communal facilities and a well equiped medical area are provided. This project was built under the Non-profit Program.

10) Central Park Lodge Thorncliffe Park, Toronto

This is a large existing facility built to Nursing Home Standards and providing a high level of care at a relatively high cost. Suites and private and semi-private rooms with their own bathrooms are provided.

11) Belmont Home Toronto

This is a municipal home for the aged completed several years ago providing luxurious accommodation to provincial standards. Very generous communal spaces are provided with an interior courtyard and large grounds. The rooms are small with 2 piece washrooms and communal bathing facilities.

12) Century Nursing Homes Brighton

An addition to contain a new nursing home to present day standards is under construction and then the existing nursing home located in a 19th century mansion and additions will become a rest home/retirement home sharing the new kitchen facilities but with a completely separate dining room and lounges.

13) Springdale Nursing Home Frazerville

This is a relatively new one storey building providing licensed nursing home care approved and supervised by the Ministry of Health. The owner/operator has provided whirlpool bath with hoist.

14) Spencer House Toronto

This existing project consists of a new building linked to two 19th century houses providing private and semi-private rooms with shared washrooms off the corridor and communal bathing facilities. Communal areas are small and there is no outdoor recreational area. A high percentage of the residents are assisted by the province through the municipal government assisted housing program.

15) St. George Manor Toronto

This is a recently completed luxury renovation of a turn of the century mansion accommodating twenty-six residents. Private and semi-private rooms are provided with private bathrooms off the rooms and off the corridors.

16) Idylwild Rest Home London

This existing facility is located in a large 19th century mansion which was a nursing home until the new regulations came into effect in 1972. It consists of wards, private and semi-private rooms with 4 piece bathrooms off the rooms and off the corridors. Communal spaces are minimal (a craftroom is needed). The kitchen and dining areas are located in the semi-basement but are satisfactory. A high percentage of the residents are assisted (the range in age is from 40 to 99).

17) La Chaumiere Rest Home Belle River

This project consists of an older one story building with a new addition with 3 bed wards and private and semi-private accommodation in the same sized rooms. The dining room and entry are being reconstructed to provide two wings, one for mentally handicapped residents and the other for aged residents. A greenhouse and planting area outside are provided. A smoking room has been provided to free the lounges of smokers. Recreation space is limited at present but will be expanded during the renovation. A small percentage of the residents are assisted.

18) Golden Gate Lodging Home Windsor

This is a very large existing facility with 4 bed wards, private and semi-private rooms. Some private rooms have 4 piece bathrooms but the majority have 2 piece washrooms (some are shared with the adjacent room). Central bathrooms are provied off the corridor. Three whirlpool baths with hoists are also provided. Circulation to the dining room is along residential corridors.

19) Meadow Croft Lodge Etobicoke

This recently completed project consists of double rooms with private 4 piece bathrooms off central corridors in a one storey building. The communal spaces are minimal and the entrance lobby, lounge and dining area are one large space. A small activity room is provided.

20) St. Rafael Nursing Home North York

This project which is at proposal stage is designed to nursing home standards with large communal, administrative, medical and food preparation areas. There are two floors of private, semi-private and 4 bed ward accommodation with separate lounges, dining area and servery. It is understood that one floor will be a licensed nursing home and the other floor a rest home with the potential for conversion to a nursing home in the future.

21) Harold and Grace Baker Centre North York

This project which is at proposal stage consists of a charitable institution, and a licensed nursing home combined. The nursing home is split into two one storey wings and the charitable institution is in a central 6 storey building. The rest home/retirement home is built to provincial standards with private and semi-private rooms and generous communal areas. Some pairs of private rooms share a 4 piece bathroom located off a shared entrance hall.

22) Greenview Lodge North York

This existing facility is built to nursing home standards and provides luxury accommodation. Private and semi-private rooms are provided with private bathrooms, some with shower stalls but most with tubs. Lounges are provided on each floor and a large activity room/chapel is located in the basement.

23) Marianhill Pembroke

This facility received at proposal state is a combined nursing home and charitable institution. The charitable institution occupies one floor of one wing and is built to provincial standards. Two piece washrooms are provided in private and semi-private rooms with central bathing facilities. Generous communal areas are provided.

24) Apple Orchard Lodge Brighton

This is a one storey project received at proposal stage providing accommodation in 4 bed wards, private and semi-private rooms. Closet arrangement is awkward and the 5'0" sliding glass doors providing light and ventilation to the rooms may present security and draft problems.

25) Senior Citizen Lodge Belleville

This facility received at proposal stage provides accommodation in a 3 storey building with generous communal spaces on the ground floor and predominantly single rooms on the upper floors (2 double rooms are provided). Basins have been located in a vanity in the rooms with only a water closet and tub in the bathroom. A large roof deck is located on the second floor above the main lounge.

3 Detailed Analyses of Four Rest Homes

1) Trafalgar Lodge, 299 Randall St., Oakville, Ontario

Originally two-storey factory building converted to 58-bed retirement in fall of 1982.

Charges
- semi-private, $900.00 per person, per month
- private, $1,400.00 to $1,400.00 per person, per month
- suites, $2,200.00 per month (per a couple)

Date of Analysis: March 14, 1983

Location
- close to downtown centre of Oakville in a mixed residential and commercial area
- close to good residential areas

Outlook
- pleasant, close to adjacent buildings

Site Plan
- landscaped area, 7.5m^2 per resident
- parking area, residents and visitors - 15; staff - 5
- level access, for handicapped
- entrance covered
- recreational facilities, not completed, suffleboard to be installed
- landscaped design, not completed, patio to be installed on north side of building adjacent to rear entrance
- service access from parking area at rear

Orientation
- entrance faces south, 18 of rooms face south, 9 face west, 14 face east and 6 face north

Interior Layout

- residential in character
- lobby - located around a corner and some distance from the entrance, no view of entrance
- administration area
  - reception area, nurses office 7.5m^2
  - vault, storage 8m^2
  - office 13m^2
- lounges - small sitting area outside dining room of 7.5m^2 (no view) and main lounge on second floor 92m^2, completely interior space with skylights, fireplace, bookshelves and glazed screens to corridors (1.7m^2 per resident)
- dining room, on ground floor, 130m^2, completely interior space with glazed screens to lobby, seats 60 (2.17m^2 per person)
- craft room, 38m^2, adjacent to lounge, provided with counter and sink (used by hairdresser) doubles as card room (.66m^2 per resident)
- no tuck shop, separate auditorium or chapel is provided
- visitors/vacation suite - when rooms are available they may be rented on a daily basis
- public washrooms, close to lounge and dining rooms, do not appears to be sized for wheelchair use
- kitchen 55m^2 (.95m^2 per resident)
- laundry facilities, 26.5m^2, staff do laundry although residents may have access to machines if desired (.46m^2 per resident)
- garbage, outside bin
- staff room, 13m^2, with washroom close to administration area (.22m^2 per resident)
- stairs, exit stairs to front and rear entrance, may be used by residents, plus one exterior fire escape (there is one dead-end corridor 17m long)
- elevators - one (not large enough for stretcher)
- corridors - most corridors 1.82m except for 2 short lengths on each floor
- drug dispensary - vault adjacent to nurse's office - 24 hour registered nurse
- kitchenettes/snack rooms, on each floor with sink, fridge, counter and cabinets, ground 5m^2, second 6m^2 (.19m^2 per resident)

Residents' Room

- 4 semi-private, 26m^2; 36 private, 18m^2 to 24m^2; and 7 suites, 35m^2 to 41m^2
- adequate space for sitting in rooms
- closets at least 1.5m per resident, most larger
- call signal to nurses office provided in bathrooms and bedrooms
- room can be furnished entirely by resident if desired
- all rooms have 4-piece bathrooms with 2 grab bars in tub enclosure, accessible by wheelchair
- doors 810mm wide

Other Spaces

- electrical room 12m^2
- mechanical room 19m^2

- service entrance 8m^2
- additional storage areas and janitor rooms

2) Oxford Lodge, Oxford Street, Guelph, Ontario

Originally a four-storey stone factory building, converted to a 100-bed retirment home in spring of 1981.

Charges
- semi-private, $742.00 to $838.46 per month, per person
- private, $934.92 to $1,484.00 per month
- suites, $1,800.00 to $2,000.00 per month (for a couple)

Date of Analysis: March 17, 1983

Location
- in an old established residential area within walking distance of the centre of town

Outlook
- pleasant, onto adjacent residential buildings

Site Plan
- landscaped area, 470m^2 (4.7m^2 per resident)
- parking area, 17 spaces
- entrance covered
- level access for handicapped
- recreational facilities - ground are limited, a shuffleboard is provided and a large paved patio is located adjacent to the lounger, exposed to western sun in summer
- landscape design, not completed
- service access on west side screened from patio

Orientation
- entrance faces east, majority of rooms face east or west

Interior Layout
- residential in character
- reception area 27.5m^2, has space for desk and seating area
- public washrooms 2.3m^2, close to lounge, remote from dining room and on second and third floor close to lounges (not sized for wheelchair use)
- lounges - main lounge 53m^2, looks out onto patio, with fireplace and glazed screen to corridor, close to entrance; smaller lounges on second floor (52m^2) and third floor (27m^2) open to corridors (1.32m^2) per resident)
- dining room - divided into 2 areas by archways, 136.5m^2, seats 110 persons, room for visitors, used as auditorium (1.35m^2 per resident)
- activity room, 50m^2, used for crafts, card playing, exercises, not provided with sink and counter (.5m^2 per resident)
- office 13.8m^2, including small private washroom
- nurses office 8.5m^2
- tuck shop 7.5m^2

- beauty/barber shop 7.5m^2
- visitor/vacation suite - available when rooms are vacant
- kitchen, 73.5m^2, includes cooler, freezer, washroom and dry goods storage (.73m^2 per resident)
- laundry facilities - outside service, washer and dryer off third floor hall for personal laundry (accessible to residents), linen storage adjacent (10m^2), dirty linen on third floor (3m2) (.13m^2 per resident)
- garbage, outside bin at service entrance
- staff rooms - ground floor, rest room with washroom 17.5m^2 and locker room on second floor 10.6m^2 (28m^2 total, .28m^2 per resident)
- stairs - exit stairs at ends of corridors; may be used by residents (dead-end situation on second floor 7.5m)
- elevators - one (not large enough for stretcher)
- corridors, 1.82m wide
- no drug dispensary, cabinet in nurse's office
- kitchenettes/snack rooms on second, third and fourth floor, 7m^2 (none of ground floor, must use kitchen, provided with counter sink, fridge, kettle and toaster) (.21m^2 per resident)

Residents' Rooms
- 41 semi-private rooms, 16m^2 to 20m^2 (including bathroom)
- 14 private rooms, 13m^2 to 15m^2 (including bathroom)
- 5 suites
- adequate space for sitting in rooms
- closets at least 1m per resident
- call signals to nurse's office provided in bathrooms and bedrooms
- rooms can be furnished entirely by resident if desired
- all rooms have 4-piece bathrooms with one grab bar in tub enclosure accessible by wheelchair
- doors 810mm wide

Other Spaces
- mechanical service area off kitchen, 30m^2
- maintenance area on 4th floor, 34m2
- janitors room 6m^2

3) Meadocroft Lodge, 25 Centennial Park Road, Etobicoke, Ontario

New one-storey building with 46 rooms, completed in fall of 1981. C.M.H.C. insured mortgage.

Charges
- semi-private $752.81 per month, per person
- private, $1,140.63 per month

Date of Analysis: February 10, 1983

Site Plan
- landscaped area, 31.5m^2 per resident (includes paved fire route on south side)
- parking, 15 spaces under building, no visitor parking adjacent to entrance

- entrance covered
- level access for handicapped
- recreational facilities, none shown
- landscaped courtyard, details not shown
- public outdoor area at entrance, residents area in courtyard

Orientation
- 1/3 of rooms face south, outside sitting areas face east and west

Interior Layout
- character is residential
- lobby, part of large area which contains lounge, dining area and circulation spaces
- reception desk is not provided
- office, off dining area, 7.3m^2 (includes 2-pc washroom)
- access route to residential wings is not clear, must cross lounge and dining area to reach north and south wing
- lounges, 36.8m^2 (free of circulation routes), .53m^2 per resident if ½ of rooms in single occupancy, no small sitting rooms
- dining, 106.35m^2 (free of circulation routes), 1.54m^2 per resident if ½ of rooms in single occupancy
- no tuck shop, kitchentte/snack area, library, beauty/barber shop auditorium or chapel are provided
- public washroom, one provided close to dining room, not sized for wheelchair use
- kitchen, 73m^2, access to service entrance and garbage room across public corridor (1.6m^2 per resident if single occupancy)
- laundry facilities, 12.5m^2 (.27m^2 per resident)
- linen 5.15m^2 (.11m^2 per resident)
- garbage 9.5m^2
- corridors 2m wide, long and straight with windows at end

Residents' Room
- 46 semi-private sized rooms 19.2m^2, the majority are probably rented as singles
- adequate space for sitting in rooms
- closets, 2 -.75m sections, small if room is in double occupancy
- all rooms have 4-piece bathrooms

Other Spaces
- janitors room, 4.15m^2

NOTE: The owner of this building would not cooperate with a survey of the residents and I was not able to arrange a tour

4) <u>Greenview Lodge</u>, 880 Lawrence Avenue East, Don Mills, Ontario

New 3-storey building containing 111 beds, completed in 1979.

Charges
- semi-private, $851.67 per month, per resident
- parking - 39 spaces, 31 under the building, 8 on grade close to the entrance
- service access, at side, directly to kitchen and office

- entrances covered
- level access for handicapped
- recreational facilities - not shown
- landscape design is satisfactory
- public and private area on south side of building off dining area, not sheltered

Orientation
- majority of rooms face south and north, dining room and coffee shop face south

Interior Layout
- character residential
- lobby, 150m^2, small sitting area, no view of street, not close to vehicular entrance
- reception desk, off lobby, close to street entrance, not visible from vehicular entrance
- administrative area, 250m^2, behind reception, includes medical preparation room
- lounges, 35m^2 on second and third floor overlooking Lawrence Avenue West, library on ground floor, 16m^2, near rear entrance, fireplace (.77m^2 per resident)
- dining room, 80m^2, on ground floor (.73m^2 per resident)
- craft room/recreation room in basement, 52.5m^2 (.47m^2 per resident)
- auditorium/general activity in basement, 53m^2 (.48m^2 per resident)
- chapel in basement, 33m2 (.3m^2 per resident)
- coffee shop/tuck shop, 38m^2
- clubroom/bar, 33m^2
- beauty/barber shop in basement, 19m^2
- public washrooms, 4-pc. sized for wheelchair use, 2 on ground floor, 2 on basement level
- kitchen, 79.5m^2 (.72m^2 per resident)
- laundry facilities, 21.5m^2
- garbage room 5m^2
- mechanical rooms, 59m^2
- staff rooms, 32m^2
- stairs - exit stairs at ends of corridors
- elevators, one, sized for stretcher
- no kitchenettes/snack areas provided

Residents' Rooms
- 25 semi-private, 17.7m^2
- 49 private, 11.2m^2 to 13m^2
- adequate space for sitting in rooms
- no built-in closets - furniture unit provided, adequate
- signal to nurses' office on ground floor is provided
- private bathrooms for all rooms, most are 4-piece, small number have shower stalls
- a central wheelchair shower and sink and toilet is provided

Other Spaces
- clean utility, dirty utility, janitors closets, linen storage and equipment, staff washrooms

NOTE: The owner of this building would not cooperate with a survey of the residents and I was not able to have a tour before the report was completed. It is my understanding that the building was designed to nursing home standards.

4. Interviews - Residents

1) Trafalgar Lodge

a) Mr. Depue - occupies single room on second floor.

Importance of Location
- no primary concern, however, it is convenient to downtown area and buses

Other Retirement Homes Considered
- none - has relocated temporarily as his apartment was damaged by fire

Comments on Charges
- good value

Comments on Ground
- proposed patio would be a good feature
- recreational facilities, not important

Comments on Interior Plan
- general atmosphere, very satisfactory
- entrance, satisfactory
- reception area, satisfactory
- lounge, pleasant room, exterior view not necessary
- dining room, pleasant room, exterior view not necessary
- recreational facilities - adequate (activities - reading and card playing)
- stairs and elevators are satisfactory
- laundry facilities - satisfactory, would not use washer and dryer
- tuck shop - not required as shops are very convenient
- snack room - uses in the evening to make coffee

Residents' Rooms
- 24 hour nurse, call signals not required
- closets, small but adequate - central storage is available
- hand shower in tub would be preferable
- southern facing windows in room, not sheltered, may be hot insummer
- room for own furniture in room
- not interested in kitchentte in room

b) Mr. Charlebois - occupies 2-room suite with wife on ground floor

Important of Location
- wife recovering from operation, daughter lives in Mississauga, temporary stay but may return next winter

- convenient to centre of town and an interesting area to walk about in
- churches and shops are handy

Other Retirement Homes Considered
- Erin Mills Lodge, no vacancy

Comments on Charges
- good value

Comments on Grounds
- site needs more landscaping, a shuffleboard and horseshoe pitch would be desirable

Comments on Interior Plan
- general atmosphere, very satisfactory
- entrance, quite satisfactory, however, an automatic sliding door would be desirable
- reception area, satisfactory
- lounge and dining room, pleasant rooms, view to outside is not necessary
- recreational facilities, adequate, pool table would be appreciated
- stairs and elevator satisfactory, uses stairs for exercise
- laundry facilities, satisfactory, can use machines if they wish
- tuck shop, not necessary, shops are close by
- snack area, uses regularly, should have table and chairs in ground floor room

Residents' Rooms
- 24 hour nurse, call signals important as wife is recovering from operation
- closets, quite adequate
- uses shower, tub has non-slip bottom, hand shower not required
- windows are very large, summer sun may be a problem
- kitchenette in room would be desirable

Other Comments
- craft room is used as beauty parlour
- whirlpool bath would be desirable

c) Mrs. McDonald - occupies 2-room suite with husband on second floor

Importance of Location
- lived in Toronto but son works nearby and it is convenient for him to drop in

Other Retirement Homes Considered
- Central Park Lodge, Thorncliffe Park
- smaller, more residential character of this facility preferable

Comments on Charges
- value satisfactory, less expensive than Central Park Lodge

Comments on Grounds
- roof deck off second floor would be excellent
- shuffleboard and gardening area should be provided

Comments on Interior Plan
- general atmosphere, very good
- security at entrances is not good, doors should be locked and residents should have keys
- reception desk should be located at front entrance, automatic sliding doors not necessary
- lounge and dining room - exterior view is not necessary
- recreational facilities - takes exercise classes in craft room, hairdresser also uses this space, separate room for card playing would be desirable as space is small
- stairs and elevators are satisfactory
- laundry facilities - satisfactory, access to machines not required
- tuck shop - not required
- snack area - uses regularly

Residents' Rooms
- 24 hour nurse and call signals very important as husband is not well
- closets inadequate, 1.5m per person would be satisfactory, uses central storage area
- does not use shower, hand shower would be convenient, short of shelf space in bathroom
- kitchenette in rooms not needed, snack area satisfactory
- has furnished sitting room with own furniture
- room face south, not concerned about summer sun

Other Comments
- chapel not needed
- whirlpool bath not desirable

d) Mrs. Dyson - occupies private room on second floor

Importance of Location
- important, had moved to Oakville to be near son and had to leave apartment due to failing sight

Other Retirement Homes Considered
- Bestview in Oakville, very nice, rooms small, no room for own furniture, no sitting area in room
- too expensive for space, more like an hotel

Comments on Charges
- good value

Comments on Grounds
- would use patio when installed
- should be parking area at front for picking up residents

Comments on Interior Plan
- general atmosphere, very good
- entrance areas - no problem with hinged door, however, security is a real concern, entrance to front or rear doors is not supervised in any way, there should be a reception desk at the front and a lock on the rear door
- lounge, dining room - exterior view not necessary
- recreational facilities - satifactory, participates in everything but exercise classes
- stairs and elevators satisfactory, uses stairs
- laundry facilities satisfactory, access to machines not required
- tuck shop, would be desirable
- snack room, uses constantly

Residents' Rooms
- 24 hour nurse, call signals not important
- closets, very good, 2 -1.5m closets, picked room for large closets, uses central storage also
- has installed her own hand shower
- has furnished room with own furniture except bed
- would not be interested in kitchenette in room
- room faces north, better for sight problems

e) Mrs. Pender - occupies private room on second floor.

Important of Location
- not too important as she does not go out very much, however, is handy for friends
- lived in Oakville all her life

Other Retirement Homes Considered
- Bestview, rooms long and narrow, closet faced into room, same charges, required to use their furniture

Comments on Grounds
- would use patio and roof deck

Comments on Charges
- good value

Comments on Interior Plan
- general atmosphere, good, well built, nicely appointed
- entrance - needs help with exterior doors, but is never out alone
- reception area - satisfactory, lounge, dining room - satisfactory, exterior view not required
- recreational facilities - does not use
- elevator has been satisfactory - would need assistance using stairs, if elevator is out of service meals are delivered to her room
- laundry facilities - satisfactory, would not use washer and dryer
- snack room - uses regularly
- tuck shop - not required, staff will pick up small items for her

Residents' Rooms
- 24 hour nurse, call signals necessary
- closets satisfactory, picked room with closet facing onto entrance corridor to allow use of room as sitting room
- uses shower, cannot get into tub, hand shower would be desirable
- has furnished room completely except for 1 chair, desk and small table, sleeps on couch, did not want room to look like bedroom
- kitchenette in room would be desirable

Other Comments
- smoking room separate from lounge would be desirable
- she has her hair done in her own room

2) Oxford Lodge

a) Mr. Little - occupies semi-private room on the second floor as a private room

Importance of Location
- not important but is convenient to downtown area

Other Retirement Homes Considered
- Norfolk Manor, rooms smaller and dark, otherwise very similar

Comments on Charges
- good value

Comments on Grounds
- patio is too exposed during summer, small sitting area in shade on east side of building is used
- shuffleboard is used

Comments on Interior Plan
- general atmosphere, good
- entrance, satisfactory, awkwardly shaped vestibule, ramp on north side, step on south side should be eliminated
- reception area, satisfactory
- lounge, outlook onto patio satisfactory, needs to be ventilated, it is the smoking area for residents
- dining room, satisfactory
- recreational facilities, activity room not used
- stairs too steep, elevator satisfactory, worries about more elderly residents during fire because of weight of fire doors
- halls, do not seem to be adequately ventilated
- snack area, uses regularly
- laundry facilities, fine, would not use washer/dryer

Residents' Rooms
- 24 hour nurse, call signals important
- closets satisfactory

- does not use shower, would not use hand shower, taps awkward for person with arthritis
- outlook excellent, bright corner room faces north and east
- kitchenette in room not desirable

Other Comments
- whirlpool bath would be useful

b) Miss Ward - occupies private room on third floor

Important of Location
- taught school in Guelph area for many years, owns house outside of Guelph which she will return to in summer
- can walk to downtown area

Other Retirement Homes Considered
- none, this facility recommended by Public Health Nurse

Comments on Charges
- good service, reasonable

Comments on Interior Plan
- general atmosphere, very nice, carpeted throughout
- entrance, doors are heavy, not a problem to get help, automatic sliding door seems like good idea
- reception area, satisfactory
- lounge, doesn't use main lounge or small lounges, outlook not important
- dining room, satisfactory
- activity room, takes exercise classes twice a week, not interested in crafts or cards
- stairs and elevators, satisfactory
- tuck shop, uses regularly
- laundry facilities, satisfactory, does not use washer/dryer
- snack area, does not use
- beauty shop, uses regularly

Residents' Rooms
- 24 hour nurse, call signal, necessary
- closet space, good
- requires assistance to bath, doesn't use shower, might be able to manage tub with another grab bar
- has used some of her own furniture

Other Comments
- not interested in whirlpool bath
- separate chapel and auditorium not needed, uses lounge, dining room and activity room

c) Mrs. Squire - occupies semi-private room as private on second floor

Importance of Location
- lived on outskirts of Guelph, has friends in Guelph, visits daughter each weekend

Other Retirement Homes Considered
- none

Comments on Charges
- too expensive, does not require large room, private batn

Comments on Grounds
- satisfactory, no outside recreation

Comments on Interior Plan
- general atmosphere, good
- entrance, satisfactory
- reception area, narrow waiting area
- lounge, satisfactory
- recreational facilities, takes exercise classes and plays cards
- stairs and elevators, uses stairs, does not trust elevators, would prefer to live on ground floor
- laundry facilities, satisfactory, would not use washer/dryer
- snack room, does not use
- tuck shop, uses regularly
- beauty shop, doesn't use

Residents' Rooms
- 24 hour nurse, call signal not necessary
- closets, satisfactory
- does not use shower
- would not use kitchenette, prefers meals provided

Other Comments
- shared bathroom off corridor would be fine

d) Mr. Fairweather - occupies private room on third floor

Importance of Location
- daughter lives in Guelph
- does not walk very much

Other Retirement Homes Considered
- other smaller facility, lower in standards, smaller room area but with private bath

Comments on Charges
- reasonable value

Comments on Grounds
- patio very hot in summer, does not need outside recreational facilities

Comments on Interior Plan
- general atmosphere, very good, clean, staff considerate
- entrance door satisfactory
- reception area satisfactory, need letter drop, mail delivered to room

- lounges, satisfactory, outlook fine
- uses smaller lounges
- dining room, very nice
- activity room, does not use, exercises in room
- stairs and elevators, exit doors very heavy, elevator out of service too often, two elevators required
- laundry facilities, fine, daughter does personal laundry
- tuck shop, does not use
- snack room, does not use
- barber shop, uses regularly

Residents' Rooms
- 24 hour nurse, call signals very important
- closet space, adequate
- did not bring any of own furniture
- has installed hand shower
- not interested in kitchenette in room
- room, pleasant view from room

Other Comments
- use of lounge as chapel and dining room as auditorium works well

e) Mr. Matheson - occupies semi-private room with his wife on ground floor.

Importance of Location

- lived outside Guelph, convenient to churches, closeness to shops not important, daughter lives nearby

Other Retirement Homes Considered
- Woolwich Lodge and Norfolk Manor
- this was by far the best

Comments on Charges
- reasonable

Comments on Grounds
- shuffleboard is used, however, it is not level
- patio faces west and is too exposed in summer

Comments on Interior Plan
- general atmosphere, good
- entrance, satisfactory
- reception area, mailboxes needed
- lounge, outlook is fine
- dining room, nice room
- activity room, does wood carving, occasionally room is not available because of other activies
- laundry facilities, satisfactory
- tuck shop, wood carving is for sale
- snack room, none on ground floor, must use kitchen, not too satisfactory
- uses barber shop

Residents' Rooms
- 24 hour nurse, call signals, important as wife is not well
- closets, satisfactory, central storage not used
- shower not used in bathroom, would not use hand shower
- they have some of own furniture in room
- kitchenette in room is not desirable

Other Comments
- lounge area used as chapel
- facility should have between 60 and 70% private rooms, too high a percentage of semi-private rooms provided

f) Mrs. Agnew - occupies semi-private with husband on ground floor

Important of Location
- from Guelph area
- close to churches, shops a good walk but mini-bus service is provided
- they have a car

Other Retirement Homes Considered
- lived at Meadowcroft Lodge before
- Oxford Lodge nicer and provides 24 hour nurse on duty

Comments on Charges
- expensive but good value

Comments on Grounds
- patio and shuffleboard are used

Comments on Interior Plan
- general atmosphere, very happy
- entrance, no problems with hinged doors
- reception area, very satisfactory
- lounge, outlook satisfactory
- dining room, satisfactory
- recreational facilities, good, space is satisfactory
- laundry facilities, washer/dryer access not important
- snack room, not provided on ground floor, can go to kitchen

Residents' Rooms
- 24 hour nurse, call signals, good feature
- closets are tight
- husband uses shower, hand shower not required
- windows are overlooked by adjacent building, but not a serious problem as windows are not large

Other Comments
- whirlpool bath would be a desirable feature
- chapel in lounge a good arrangement
- plenty of activities arranged

g) Mrs. Steed - occupies semi-private room on second floor, at present no other occupant

Importance of Location
- very ill when she arrived, moved in by doctor

Other Retirement Homes Considered
- none

Comments on Charges
- satisfactory

Comments on Grounds
- no sheltered place to sit outside

Comments on Interior Plan
- general atmosphere, great
- entrance, no problems with doors
- reception area, satisfactory
- lounge, outlook satisfactory, piano provided on her request
- dining room, satisfactory
- recreational facilities, lots of activities, plays bridge, activity room satisfactory
- stairs and elevator, can use stairs when elevator is out of service
- laundry, does not use washer/dryer
- snack room, uses regularly

Residents' Rooms
- 24 hour nurse, call signal, necessary
- closet adequate, storage room is small
- bathed by staff, does not use shower
- outlook from room is nice
- kitchenette in room not wanted (can invite visitors to dinner in dining room)

Other Comments
- smaller lounge on third floor doubles as library

5. **Interviews - Lenders/Brokers**

1) Blake Wallace of Murray & Co., Mortgage Brokers

Mr. Wallace's company arranges mortgages for owners of both nursing homes and rest homes or retirement homes. His major comment with respect to the Insured Lending Program is that at present C.M.H.C. is offering considerably less than the appraised value of the properties and charging much higher fees than the private sector. It is, therefore, easier and cheaper to go to conventional financing. Nursing homes should appraise at $45,000.00 per bed and rest homes at $25,000.00. The difference is due to the assured income a nursing home obtains from the Ontario Health Insurance Program.

He also stated that most experienced nursing home operators are building extra rooms to nursing home standards as the 60-bed module (per nursing station) is absolutely necessary for economical operation. He felt that rest homes should be built to at least nursing home standards and should exceed them primarily in the provision of more single and double rooms, to provide more privacy and to make them more marketable.

He had an additional comment regarding Municipal Homes for the Aged. He feels strongly that this program should be removed from municipal managment and from the supervision of the Ministry of Community and Social Services. This program receives subsidies from the municipal government in the form of tax relief, and from the federal government in the form of reduced mortgage interest and is competing directly with nursing home operators and the private rest home operators, providing the same service at considerably higher cost to the taxpayer.

2) King Hicks of Kopas & Burritt, Mortgage Brokers

Mr. Hicks' company is involved with arranging mortgages for owners of both nursing homes and retirement homes. He has been involved with several luxury retirement homes in the Toronto area which will offer accommodation for $3,000.00 to $4,000.00 per month, some of which have mortgages insured by C.M.H.C. This is a very active field in the larger, more affluent centres. He was concerned about the room width on one project we discussed. Some of the private suites consisted of a small sitting room, a dressing area with bathroom, and bedroom. The width was about 2,750mm and the depth about 9,100mm with the bedroom facing the exterior and the sitting room facing an interior passageway. He had reservations about the ease of renting a room of that width in the luxury market as the whole market for retirement homes is still being defined.

He also pointed out that the nursing home license is with the operator, not the building. Therefore, the value of the building could, theoretically, be seriously reduced if the operator sold the building without the license or a new inexperienced operator took over.

3) Norm Gibson of the Toronto Dominion Bank

Mr. Gibson pointed out that all of their loans for nursing homes and retirement homes are required to be insured by C.M.H.C. The mortgages come from pension funds which require insurance. Mr. Gibson has only been involved with mortgaging one private retirement home and it did in fact default on its mortgage and was taken over by C.M.H.C (now Central Park Lodge on Spadina Road). The market was not good and the rent-up period was too long. The Toronto Dominion Bank's main involvement has been with non-profit projects, co-operatives for families and senior citizens and charitable institutions. They provided the mortgage for the Ukranian Home for the Aged in Mississauga which is a mix of self-contained apartments and single and double rooms with generous communal facilities and a central dining area.

The applications for mortgages come to them from a broker who has already cleared the project through C.M.H.C. He does not think the

Toronto Dominion Bank would become involved in providing a mortgage for a private rest home/retirement home unless the developer had an extremely good track record.

6. **Interviews - Rest Home Owners/Administrators**

1) Paul Gauthier, Owner/Manager, Century Manor Nursing Home in Brighton, Ontario

The present facility consists of 28 beds located in an 1880's mansion and a newer addition to the rear. The operation started with 14 beds in 1967 and had 25 beds when the Nursing Home Act came into effect in 1972.

A new building is under construction to the north of the existing building which will have 40 nursing home beds to present day standards and provide kitchen facilities for a new 22 bed rest home which will occupy the existing house and its addition. The new nursing home will also have 2 beds for short term stay (vacation beds). Mr. Gauthier also operates a 33 bed nursing home in Campbellford. Brighton will be his first rest home operation.

He feels that rest homes should be residential in character; must be separate from the nursing home but should be built to nursing home standards where feasible, with a high percentage of single and semi-private rooms.

His mortgage, which is insured by C.M.H.C., is personally guaranteed by him. The appraisal value for nursing homes is based on replacement value, income and historical market value.

Unionized employees can be a serious problem due to higher wage demands but, with reasonable wages, good service can be provided and good profit made by owners of nursing homes. O.H.I.P. pays $39.00 per day for each resident.

2) Earl Daynes, Owner/Manager, Springdale Manor Nursing Home, south of Peterborough on Hwy. 28, Ontario

Mr. Daynes operates nursing homes and rest homes in Lindsay, Napanee, Ottawa and Peterborough. He will shortly be building a new building in Peterborough and has just purchased a 289 bed nursing home in Metro Toronto - Kennedy Lodge. A "grandfather" clause allowed many sub-standard nursing homes to continue with some minor upgrading after legislation came into effect in 1972. After the 1980 fire in the Extendicare building in Mississauga (20 persons died in a new building build to high standards) a serious program was undertaken by the Ministry of Health to eliminate substandard buildings. Uncooperative owners are heavily fined to encourage them to rebuild or to sell their licenses (licenses cannot easily be revoked). Licenses now sell for between $8,000.00 to $11,000.00 per bed. The 60-bed module for nursing homes is necessary for economical operation.

The market for luxury rest homes is growing but will be restricted to affluent centres although the Peterborough area has some potential due

to the nearby Kawartha Lakes summer vacation area. Charges in Toronto could be $32.00 - $80.00 per day, per person, in a semi-private room. Peterborough could be $35.00 - $40.00 per day and Lindsay $25.00 - $30.00 per day. Municipal Homes for the Aged compete with nursing homes as they provide extended care. They are not regulated by the Ministry of Health, are heavily subsidized and no means test is required. He does not foresee any provincial government standards for rest homes.

Private bathrooms are not necessary to make a rest home marketable but would be desirable for some private and semi-private rooms. Whirlpool baths (which he installs in all his nursing homes) are a great feature. Walk-in hot tubs have become very popular also. Nursing stations should not be provided (they are too institutional) but an intercom to the main desk should be provided. A closet of at least 1,500mm should be provided for each resident (more storage space encourages hoarding).

3) Mrs. M. Nesbitt, Administrator, Oxford Lodge, Guelph, Ontario

Mrs. Nesbitt has had 15 years experience in nursing homes and retirement homes and is a registered nurse. Oxford Lodge has capacity for 100 residents and has been open since July 1981. It is now 50% occupied. Mrs. Nesbitt pointed out that Municipal Homes of the Aged can offer a resident a broader range of care. Although they only admit independent residents, they can offer them the assurance of extended care when they require it. Private rest homes and charitable institutions cannot do this. They can, of course, provide more care but they cannot charge for it. She would like to see private retirement homes permitted to provide up to 10% of their beds as nursing home beds so that residents would have the same security that they would not have to move to another facility if they became seriously ill.

The dining room in Oxford Lodge provides 110% capacity so that all of the residents can dine at the same time and there is additional room for visitors. The philosophy behind the layout and operation of Oxford Lodge is to provide as much independence and privacy for the residents as possible. A registered nurse is on duty 24 hours a day with call signals from each room. All rooms have private 4-piece bathrooms and small snack areas are provided on each of the upper floors. There is an activity room and an activity director, a small tuck shop, beauty, barber shop and lounges on each floor.

4) Miss Anne Whitehouse, Public Relations, Erin Mills Lodge, Mississauga, Ontario

Erin Mills Lodge has a capacity of 200 beds which area distributed among semi-private and private rooms and suites. the rooms have full 4 piece bathrooms and the suites have a sitting room and bedroom with 4 piece bath. Large communal areas are provided with several lounges and a large activity room. Two sittings are required in the dining room and a small private area is provided for special parties. Access to all bedroom areas, except for a section on the third floor, is by means of ramps. The third floor area provides special attention for

those residents who require it, with a small nursing station and separate dining area. The rooms have been kept small and the lounge areas large to encourage the residents to socialize. Small snack areas are provided throughout the residential wings and the residents are encouraged to do their own personal laundry in laundry rooms in each wing. A registered nurse is on duty 24 hours a day and call signals are proved in each bedroom and bathroom. A small exercise room, a heated whirlpool bath and a sauna are also provided. (The sauna is not recommended as its operation has to be closely supervised for elderly people). Charges range from $912.50 per month, per person, for a semi-private room, to $2,631.00 per month for the largest suite.

5) John Thorpe, Administrator, St. Hilda's Towers, Toronto

St. Hilda's Towers consists of two towers containing 344 apartments with kitchenettes and full bathrooms. A small percentage are one-bedroom units, the rest are bed-sitting rooms. The kitchenette arrangement allows the residents to prepare their own breakfast and lunch but discourages preparation of dinner which is provided in two dining rooms, one for each tower. Breakfast is also offered but a very small number of residents have taken advantage of this service. Some furniture is supplied but the majority of the residents supply their own. The opportunity to do limited cooking in the apartment increases privacy and encourages independence and freedom. There is a medical centre with a registered nurse on duty 24 hours a day and also generous communal areas for residents' activites. Nutrition and safety are not a problem. The dinners served are designed to provide a good level of nourishment, no problems have been encountered and there have only been two problems with burned pots in the 7 years that the buildings have been open. The undercounter fridge in the first building has proved to be too low for elderly residents and has been raised to counter height in the second building. Hand showers were installed in the first building and would have been used in the second building if technical problems with bulkheads above the tubs had not precluded their use. Mr. Thorpe feels very strongly that air-conditioning is necessary for senior citizens and can be easily justified economically in reduced medical costs.

7. **Literature Search - Relevant Canadian and American Literature**

1) Nursing Homes and Hostels with Care Services for the Elderly. Design Guidelines CMHC Ottawa 1979.

- provides the elements of good design based on a sound philosophy, intended to stimulate not prescribe solutions, a reference for standards of shelter for the elderly in a group setting.

2) Housing the Elderly CMHC Ottawa 1972.

- an advisory document dealing with desirable standards of housing designed specifically for elderly people who are sufficiently healthy and mobile to live independently in self-contained units.

3) Site Planning Criteria CMHC Ottawa 1977.

- provides direction to developers and their consultants in the design of housing and a basis for review under the terms of the National Housing Act.

4) Building Better - Associated Senior Executives of Canada Ltd. 1973/74

- a survey of Ontario Homes for the Aged as viewed by residents and by an independent group of senior citizens.

5) Ontario Ministry of Community and Social Services - Capital Administrative Services Branch. Planning Guidelines for Homes for the Aged and Elderly Enriched Housing. Toronto 1980

- the criteria to be considered in planning and designing or renovating a residential setting for older people.

6) Ontario Ministry of Municipal Affairs and Housing. Technical Guide for Special Projects with Care Facilities. 1982

- guidelines prepared for the Province of Ontario Task Force on Aging for the sector dealing with retirement communities and shelter options.

7) Cooperative Housing Federation of Toronto. Housing for Senior Citizens - Is the non-profit cooperative housing program feasible? Toronto 1980*

- an assessment of the potential of the non-profit cooperative housing model under present financing programs as an answer to the housing needs of Senior Citizens.

8) Ontario Secretariat for Social Development. The Elderly in Ontario: An Agenda for the 80's

- looks at the past, present and future lives of Ontario's elderly and makes recommendations on how best to deal with needs not being addressed at the present time.

9) Designing the Open Nursing Home. J. A. Koncelik, Stoudsburg, Penna. Dowden, Hutchinson & Ross 1976

- discusses the physiological, cultural social and psychological characteristics of the elderly in nursing homes; the organizational characteristics, issues and potential goals for the overall design of the nursing home environment; the design of spaces accessible to the elderly and features such as furnishing, fixtures and products commonly used in nursing homes.

10) Design of Long-Term Care Facilities, Laszlo Arangi, Larry L. Goldman. Van Nostrand Rienhold Company 1980

- provides information on starting, designing and running an institution that best serves the needs of the elderly.

11) Concregate Housing for Older People. The International Centre for Social Gerontology U.S. Department of Health, Education and Welfare etc.

- a selected collection of papers on the state-of-the-art in congregate housing ranging from basic research to actual experiences in designing, financing and managing such projects.

12) Planning Housing Environments for the Elderly. L. E. Gelwicks and R. J. Newcomer. National Coucil on Aging. Washington D.C. 1974*

- deals with the interrelationship between housing and services and

- provides planning and design guidelines for the creation of housing for the elderly.

13) Planning and Managing Housing for the Elderly. M.P. Lawton, John Wiley & Sons New York 1975

- deals with the social and psychological aspects of housing environments as they relate to housing for the elderly.

14) Beyond Shelter - a Study of the National Housing Act financed housing for the Elderly. Ottawa. Canadian Council on Social Development 1973*

- a study of housing that has been specifically designed for the elderly to determine if it is adequately meeting the needs of senior citizens that lie beyond the simple provision of shelter.

15) Emphasis on Living. A Manual on Retirement Housing. James A. Christison Valley Forge Hudson Press 1970*

- outlines the steps to the taken for the successful development and operation of a retirement centre which meets basic needs without restricting the activities or independence of elderly residents.

16) The Elderly and their Environment - a pilot enquiry into the Senior Citizen Housing satisfaction Environ Research Group 1971*

- a study to generate hypothesis about the present housing conditions and options of the elderly by identifying and investigating those salient environment or contextual factors which bear directly upon the satisfaction of older people.

17) The Retirement Residence - an analysis of the architecture and management of Life Care Housing. James Frush Jr. and Benson Eschenback Springfield Ill. Thomas 1968*

- the economic criteria of the design and management of housing for the elderly.

18) A Guide to the Design and Development of Housing for the Elderly. Concord N.H. New England, Non-progit Housing Development Corporation 1978*

- a basic primer in non-profit elderly housing development intended to provide a brief discussion of each of the many issues to be encountered including housing needs, housing demand, elderly services, housing concepts, management, funding sources and site analysis.

19) Non-profit Housing for the Aged and Other Special Care Groups - a policy study for CMHC George Hart 1976*

- a review of CMHC's present basis funding care facilities for the elderly and handicapped and the federal and provincial legislation dealing with the capital and operational support of such facilities.

20) Study of User Satisfaction - Senior Citizen Housing. Wilma Haworth, Halifax Nova Scotia Housing Commission 1973.*

- sample questionnaire and analysis of results of research project

21) Housing the Elderly - Towards an Understanding of the Needs of the Elderly. Toronto Social Planning Council of Metropolitan Toronto 1978*

- a preliminary analysis of data collected in the course of a two part project related to the socio-economic needs of the elderly, a Budget Guide for the Elderly and an interview survey designed to assess the actual expenditures of elderly households

22) Housing for Senior Citizens. Policy Planning Division CMHC. Ottawa 1970

- an analysis of some of the variable involved in housing for senior citiznes considerling the objectives of a program for senior citizens' housing, an examination of previous developments in this field and an investigation of the policy options available.

23) Housing for the Elderly. The development and design process Issac Green et al New York. Van Nostrand Rienhold Co. 1975*

- a guide to those types of shelter, environment and services required to support independent life styles of tenants at two levels, those able to cope fully with the demands of every daylife and those who require a special seting of concregate housing with personal, social and health short of full medical care.

24) Housing for Older People, a directed research project conducted by the Centre for Continuing Education, University of B.C. with CMHC. Majorie V. Smith. Vancouver The Centre 1976*.

- a scientifically conducted study on expectations of and reactions to Senior Citizen housing.

25) Performance Criteria for the Design of Housing for the Elderly in New England. Tadgh Sweeney. Concord N.H. New England Non-profit Housing Development Corporation 1975*

- four parameters - medical, social, financial and managerial are used as the background information from which performance criteria are developed for the design of elderly housing.

26) Better Buildings for the Aged. Joseph Douglas Weiss. New York McGraw Hill 1969*

- reviews the steps to be taken in the development of homes for the aged and illustrates a variety of designs and approaches.

27) Retirement Home Supply/Demand Analysis Toronto Census Metropolitan Area December 1982 Gord Garland Research Offices Toronto Branch

- prepared to assist in the development of an appropriate program delivery strategy.

* Available from the Canadian Housing Information Centre CMHC, Ottawa